

# Overtime Refusal / Callout Refusal Reporting Form

Sheet 1 of 1

|                |                                |
|----------------|--------------------------------|
| Date Worked:   | July 3, 2025 S1 Kiln PA or CCO |
| Person Worked  | J Kaiser                       |
| Work Order No. |                                |

| Date Requested | Persons Called Out or Requested to Work Overtime (in order requested) | Refusal (note time refused) | Accepted (note time accepted) | Not Available (note time called) | No Answer (note time called) | Hours Chg |    | Reason For Callout  | Performed position tasks without assistance Yes / No |
|----------------|-----------------------------------------------------------------------|-----------------------------|-------------------------------|----------------------------------|------------------------------|-----------|----|---------------------|------------------------------------------------------|
|                |                                                                       |                             |                               |                                  |                              | OT        | DT |                     |                                                      |
| July 2, 2025   | M Terney                                                              |                             |                               |                                  | 19:17                        |           |    | Kiln/CCO for B crew |                                                      |
|                | R Stuparyk                                                            |                             |                               |                                  | 19:18                        |           |    |                     |                                                      |
|                | J Blaikie                                                             |                             |                               |                                  | 19:21                        |           |    |                     |                                                      |
|                | J Kaiser                                                              |                             | 19:23                         |                                  |                              |           | 12 |                     | Yes                                                  |
|                |                                                                       |                             |                               |                                  |                              |           |    |                     |                                                      |
|                |                                                                       |                             |                               |                                  |                              |           |    |                     |                                                      |
|                |                                                                       |                             |                               |                                  |                              |           |    |                     |                                                      |
|                |                                                                       |                             |                               |                                  |                              |           |    |                     |                                                      |

This form is to be completed on each occasion that overtime or a callout is worked or refused by an employee.

Supervisor I Akingbade