



## PAYROLL CORRECTION MEMORANDUM

DATE:

TO: The Payroll Department

FROM: Employee Name \_\_\_\_\_

**EMPLOYEE:** Obtain your final time sheet from your supervisor. List below any missing hours; include date, beginning and ending times of your shift, and the site or location.

**For example:**           **06/01/13**                   **8am - 12 midnight**                   **Bond Avenue**

Give to supervisor for approval.

**SUPERVISOR:** Attach a copy of the employee's time card or final pay sheet for the pay period in question - verify the hours listed below. Remember to sign and date this form before faxing it to the Payroll Department. Fax # 410-649-0905 or 410-358-6655.

DAY	DATE	SHIFT	LOCATION
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

COMMENTS: