

SHASTA HEAD START CHILD DEVELOPMENT, INC.

PAYROLL ADJUSTMENTS

Jane Doe
EMPLOYEE NAME

2/01/2021
DISCREPANCY DATE

DESCRIPTION OF PAYROLL DISCREPANCY

Jane was short 2 hours of regular time on February 1, 2021

PAYROLL ADJUSTMENT

Select the appropriate adjustment.

<input checked="" type="checkbox"/> REGULAR	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	2	HOURS
<input type="checkbox"/> OVERTIME	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> HOLIDAY	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> PTO	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> SICK	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> BEREAVEMENT	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> JURY DUTY	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> COVID	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> PSL SELF	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> PSL FAM/DEP	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS
<input type="checkbox"/> PFL	<input type="checkbox"/> OVERPAID	<input type="checkbox"/> UNDERPAID	_____	HOURS

TIME SYSTEM

I have attached a copy of the employee's timecard before and after the correction.

Adjustment results in reduction to the employee's check. (Employee's authorization required.)

PROCESS ADJUSTMENT

NEXT PAYROLL IMMEDIATELY

EMPLOYEE SIGNATURE (Reduction to EE Check)



DATE

02/05/2021

DATE

MANAGER SIGNATURE

DIRECTOR SIGNATURE

DATE

FISCAL

DATE PROCESSED

PAY PERIOD

PAYROLL SIGNATURE

DATE