

Time Clock Correction Form

EMPLOYEES: If a punch is missed, or needs a correction, please complete this form and return it to your supervisor. Use a separate form for each date. Enter the ACTUAL time you arrived, or left, NOT your scheduled time. If correction is not made Sunday, before the store closes, the missing hours will not be on current paycheck but will be added for next week's paycheck.

Name:

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I emailed payroll@vhdistro.net

Date:

In-Time: AM

PM

Out-Time: AM

PM

Reason For Correction:

Employee Approval: By filling out and signing this form the employee certifies that the information reported above reflects the accurate correction needed for the Time Clock.

Employee Signature:

Supervisor Signature:

PTO Dates: Month: _____ Day: _____ – Month: _____ Day: _____

Number of Hours: _____

Date Requested/Date emailed Payroll: _____
