

PAY ADJUSTMENT FORM

(HR-F551)

DATE:			SALARY WAGE C	ORRECTION:		
EMPLOYEE NAME:			EMPLOYEE LOCATION:			
EMPLOYEE ID NUMBER: E000			EMPLOYEE TYPE	EMPLOYEE TYPE:		
GROSS AMOUNT	GROSS AMOUNT	UNDER PAID:				
COMMENTS How error was discovered, lature of Error, etc.):						
COLLECTION EFFORTS include # of pay periods error occurred):						
HR Technician:	DAT	E:	HR Specialist:		DATE:	
Chief HR Officer:					DATE:	
*Chief Financial Officer:					DATE:	
*Amounts over \$1,000.00 require the Chief HR Officer's signature. **Over payments \$2,000.00 or over require the Chief Financial Officer's signature. NET AMOUNT:						
SUPPORT DOCUMENTATION CHECKLIST						
Print and Review Pay History						
Generate Calculation Spreadsheet and Calculate Amount Due Email Spreadsheet and Amount Due/Owed to Payroll						
☐ Review Documentation with HRS ☐ Enter Pay Assignment/Threaded Note ☐ Submit [ocumentation to Payroll		
☐ Contact Employee and Advise of Over/Under Payment ☐ Generate Over/Under Payment Letter to Employee						
COLLECT DOCUMENTATION, MAKE 2 COPIES:						
	1	To Personnel F	ile 🔲 To HRS			