**Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | | |
| Employee ID: |  | Department: |  |
| Job Title/Position: |  | | |
| Contact Number: |  | Email Address: |  |

**Payroll Period Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Pay Period Start Date:** | \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ (DD/MM/YYYY) | **Pay Period End Date:** | \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ (DD/MM/YYYY |
| **Date of Incorrect Payment:** | \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ (DD/MM/YYYY) |  |  |

**Correction Details**

**Type of Correction:**

|  |  |  |  |
| --- | --- | --- | --- |
| Incorrect Hours Worked | Overtime Not Accounted For | Incorrect Pay Rate | Missing Pay |
| Deduction Error | Bonus/Commission Error | Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Description of the Error:**

|  |
| --- |
|  |
|  |
|  |

**Corrected Details:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Correct Hours Worked:** |  | **Correct Pay Rate:** $[X] per hour |  |
| **Correct Overtime Hours:** |  | **Other Corrections:** |  |

**Supporting Documentation Attached:**

|  |  |  |  |
| --- | --- | --- | --- |
| Time Sheets | Pay Stubs | Attendance Records | Other (Please specify) |

**Employee Certification**

|  |  |  |
| --- | --- | --- |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Employee Name), certify that the information provided in this form is accurate and complete to the best of my knowledge. | **Employee Signature:** | **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ (DD/MM/YYYY) |

**Manager/Supervisor Review**

|  |  |  |
| --- | --- | --- |
| **Manager/Supervisor Name:** |  | **Signature:**  **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ (DD/MM/YYYY) |
| **Department:** |  |
| **Comments:** |  |

**Payroll Department Use Only**

|  |  |  |  |
| --- | --- | --- | --- |
| Date Received: | (DD/MM/YYYY) | Received By: |  |
| Investigation Notes: |  | | |

**Correction Action Taken:**

|  |  |  |  |
| --- | --- | --- | --- |
| Adjusted in Next Payroll | Special Payment Issued | Other (Please specify): | |
| **Corrected By:** |  | **Date Corrected:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ | (DD/MM/YYYY) |

**For Office Use Only**

|  |  |  |  |
| --- | --- | --- | --- |
| **Final Approval By:** |  | **Date of Final Approval:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ | (DD/MM/YYYY |

* **Additional Comments:**

|  |
| --- |
|  |
|  |
|  |