

Timecard Change Authorization Form

FOR INTERNAL BUILDING USE ONLY--DO NOT FORWARD TO PAYROLL.
BUILDING ADMINISTRATOR MUST RETAIN FORMS FOR AUDIT/COMPLIANCE PURPOSES

Employee Name:

Building:

Reason For Adjustment:

Adjusted Date (s) & Time(s)

Missing In Punch

Missing Out Punch

Wrong Badge # Used

Other, Please Specify

Employee Signature:

Date:

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Your signature certifies that this information is accurate and complete.

Supervisor Initials:

Date: