

San Diego County Office of Education Abatement Adjustment Form

Email form to PayrollSvcs@sdcoe.net after completing Sections 1-3, including abatement documentation and copies of paystubs. **Due to Payroll Services no later November 17th @ NOON**

1. Request Information

Date of Request: District #: District Name:

Requestor:

Contact Phone: Contact Email:

2. Abatement Information

Employee Name:

Employee ID-Rec Position:

Pay Cycle Abatement Amt:

Details:

3. Year to Date - Taxable Gross

Calendar Year: Quarter:

YTD Taxable Gross: Abatement Amt:

Employee Refunded: Yes No Soc Sec Refunded

SS Yes NA Med Yes NA Medicare Refunded

4. Payroll Services Information

Completed By: Date:

Taxable Gross Verified: Quarter:

Adj Needed: Yes No

Processing Notes: