



Payroll Omission Form

Employee Name:

File #:

Department:

Please fill in the date, punch in/out time, and hours that were omitted. If there are missing hours for more than one pay period please fill out a separate Omission Form for each week.

DAY	DATE	PUNCH IN TIME	LUNCH OUT TIME	LUNCH IN TIME	PUNCH OUT TIME	# OF HOURS	REASON
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Total Hours: _____

Employee Name:

Signature:

Date:

Supervisor Name:

Signature:

Date:

Manager Name:

Signature:

Date:

Director Signature:

If this omission occurred due to an employee's missed punch then the Payroll Omission Explanation Section below is required.

I understand that it is my responsibility to punch in/out at the time clock and the missing punches in the future can lead to disciplinary action, up to and including termination.

Explanation (required for missed punches)

Note: Your missing hours will be paid to you with the next payroll cycle following the date that this signed document is received by the payroll department.