

9 Industrial Road, Suite #5 Milford, MA 01757 Phone 508-473-1480 • Fax 508-473-1210

Historical Timecard Change Form

(Please send this form w/all required documentation to Payroll at the Finance Office)

Today's Date: _____ Pay Week: ____ Location of Work: ____ Employee Name: _____ Employee Number: _____ Reason/Request for Change: _____ Old Timecard: **New Timecard:** # of Hours Job Code/Cost # of Hours Job Code/Cost Date P<u>ay</u> Center Requiring Being Pay Center Being Correction Corrected Code (if applicable) Corrected Code (if applicable) □ Copy of Kronos timecard that needs correction attached? Date: ____ Approved by: _ Manager _____ Date: ____ Reviewed by: _

_____ Date: ____

Payroll

Processed by: _