

# 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

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Missing Out Punch

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Wrong Badge # Used

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Other, Please Specify

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Employee Signature:

Date:

<input type="text"/>	<input type="text"/>
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*Your signature certifies that this information is accurate and complete.*

Supervisor Initials:

Date: