



# WHATCOM COUNTY

## District Payroll Correction Form

Employee Name - First		Middle	Last
Employee Number	District		

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Supervisor Approval

**Problem:**

- No check generated, attach copy of time sheet
- Salary or Wages are incorrect, complete below
- Federal withholding incorrect
- Other

**Explanation:**

Please make the following corrections.

What Was Paid In Error/Incorrectly				
Date	Pay Type	Hours	Rate	Notes
Total Hours		-		

In the space above enter what was paid incorrectly. For example if 8 hrs were paid at pay type 001 and should have been paid at pay type 710. Enter 8 hrs pay type 001 on the date above and enter 8 hrs pay type 710 on the date below.

What Should Have Been Paid				
Date	Pay Type	Hours	Rate	Notes
Total Hours		-		

**Resolution:**

I, the undersigned, certify that the labor hours as described above are just, due, and unpaid labor claims against the District, and that I am authorized to certify to said claims. Signed copies of timesheets are available for audit at our location.

Prepared by:	Date:	Commissioner Approval:	Date:
	Phone:	Commissioner Approval:	Date:
Input By:	Date:	Commissioner Approval:	Date: