

ATTENDANCE CORRECTION

TO: Employee Services				MAIL CODE: 0707				TODAY'S DATE: 8/4/20				* FOR PAY ENDING DATE 7/4/20									
FROM Doug Van Slembrouck				MAIL CODE: J706				COST CENTER: 27690				- NOTE - • ENTER PAY ENDING DATE FOR PERIOD OF OCCURRENCE (ONLY ONE PAY ENDING DATE PER FORM)									
EMPLOYEE NAME: Doug Van Slembrouck																					
EMPLOYEE I.D. NUMBER: E137360						PAYGROUP: <input type="checkbox"/> BU <input checked="" type="checkbox"/> NBU <input type="checkbox"/> EXEC <input type="checkbox"/> TEMP															
TYPE CHG.	DATE			BLANK	EARN CODE			BLANK	HOURS				BORROWING COST CENTER				EARNINGS NAME				
	MO.	DAY	YR.																		
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EMPLOYEE SIGNATURE												PHONE NO. 2484958358				DATE 8/4/20					
MANAGEMENT SIGNATURE												PHONE NO.				DATE					

Instructions: Fill in this document in Microsoft Word, then select Office Button > Save As > Adobe PDF. Then submit the PDF version of this form.