

**PAYROLL ATTENDANCE & LEAVE ADJUSTMENT**

EMPLOYEE NAME: \_\_\_\_\_ PAY PERIOD: \_\_\_\_\_ THROUGH \_\_\_\_\_  
 (LAST) (FIRST) (MI)

SOCIAL SECURITY NUMBER									

SSN STATUS

DEPT/DIV				

PAY PERIOD	

ANNUAL LEAVE BAL: \_\_\_\_\_ ANNUAL LEAVE USED YTD: \_\_\_\_\_  
 SICK LEAVE BAL: \_\_\_\_\_ SICK LEAVE USED YTD: \_\_\_\_\_  
 CALENDAR YR. SICK LEAVE USED: \_\_\_\_\_ CALENDAR YR. HRS. W/O: \_\_\_\_\_  
 COMPENSATORY TIME BAL: \_\_\_\_\_ COMPENSATORY TIME USED YTD: \_\_\_\_\_  
 PREMIUM COMP. BAL: \_\_\_\_\_ MISC. TIME USED YTD: \_\_\_\_\_

	ANNUAL					SICK					COMP					
	PREV BAL	ACC	USE	BAL	NEW BAL	PREV BAL	ACC	USE	BAL	NEW BAL	PREV BAL	REG ACC	PREM ACC	USE	BAL	NEW BAL
JAN 01-15																
16-31																
FEB 01-14																
15-28																
MAR 01-15																
16-31																
APR 01-15																
16-30																
MAY 01-15																
16-31																
JUN 01-15																
16-30																
JUL 01-15																
16-31																
AUG 01-15																
16-31																
SEP 01-15																
16-30																
OCT 01-15																
16-31																
NOV 01-15																
16-30																
DEC 01-15																
16-31																

EXPLANATIONS: \_\_\_\_\_  
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\_\_\_\_\_  
 HUMAN RESOURCES OFFICER

\_\_\_\_\_  
 COMMISSIONER OF HUMAN RESOURCES

PREPARED BY: \_\_\_\_\_