

Payroll Reconciliation Sheet

Employee	e Name:			
-	d End Date: be submitted to SCHOOL OFFICE	CE in same pay p	eriod as time w	orked or taken off)
approved O NOTE: Paid	m to report adjustments to your in to report adjustments to your in were Time, Paid Time Off, or any on the time off (personal, sick, vacation in the contract of the time Clock Plus does not recontract.	ther payroll scend a) MUST be enter	arios not supporte ed in to AESOP in	ed by TimeClock Plus. addition to being
Date	Adjustment Reason	Start Time	End Time	Total Hours
	Total Hour			
-	a true and accurate record of my tim rious infraction which may result in te	•		e. Falsification of time
Employee Signature:			Date:	
Administrator's Signature:			Date:	
For Admin Us	e Only:			
Location:				
Entered into T	CP and sent to Payroll by:			