

Payroll Missed Punch Form



*** PLEASE COMPLETE ALL APPLICABLE FIELDS. ANY INCOMPLETE FORMS WILL BE RETURNED AND UNPAID***

Include copy of Time Centre timesheet along with MPF for processing.

Home Business Unit: _____

Name/Nombre: _____

Pay Period Ending: _____

Employee ID/Identificacion de Empleado: _____

TimeCentre Card Number: _____

Employee ID can be found on check stub or Provide complete SSN.

Complete By Employee						Complete By Manager/Supervisor/Admin			
Enter Date/ Fecha MM/DD/YY	Shift AM or PM (circle one)	Time In Entrada	Time Out Salida	Lunch Taken (.50 / 1.00)	Paid Time Away (Vac, Hol, Etc)	Total Hours	Business Unit	LOB	Reason for MP
Sunday		am / pm							
Monday		am / pm							
Tuesday		am / pm							
Wednesday		am / pm							
Thursday		am / pm							
Friday		am / pm							
Saturday		am / pm							
Sunday		am / pm							
Monday		am / pm							
Tuesday		am / pm							
Wednesday		am / pm							
Thursday		am / pm							
Friday		am / pm							
Saturday		am / pm							
TOTAL						0			

Employee Signature/Firma del Empleado
 Hours missed will be added to the next pay cycle
Horas faltantes se agregara al proximo ciclo de pago

Today's Date _____

TOTAL HOURS TO BE PAID:	
Number of hours	Pay Type (Reg, OT, DT, Vaca, Other)

Approving Manager's Signature
 I have also included a copy of the TimeCentre Timesheet

Date _____

Approving Manager's Name (please print)

Check will be issued and mailed on the following pay date from date received in payroll