



SCMG Pay Error Correction Form

Please turn form into the SCMG office - This form SHOULD NOT BE LEFT AT THE POOL

Employee Information

Employee ID: _____ Date: _____

Last Name: _____ First Name: _____

Email address: _____

Error Information

Pay Error Type: Base Pay Add'l Compensation Deductions Taxes

Correction: Over Pay Under Pay Missing Pay (ex. Swim lessons, pool party pay)

Pay Period of Error: Start Date: _____ End Date: _____

Describe the pay Error and Reason for Adjustment:

Second Pay Error Type:

Pay Error Type: Base Pay Add'l Compensation Deductions Taxes

Correction: Over Pay Under Pay Missing Pay (ex. Swim lessons, pool party pay)

Pay Period of Error: Start Date: _____ End Date: _____

Describe the pay Error and Reason for Adjustment:

There are 2 ways this form can be submitted to the SCMG office:

1. You can deliver this form by hand (in person) to the office.
2. You can mail this form to the SCMG office: 9801 Kinsey Avenue Suite 160 Huntersville, NC 28078

This form should not be left at the pool for your manager to submit to the office.

HR and Payroll Use Only

Amount Due: _____ Approved By: _____ Date: _____

Payment Method: On Cycle Date Manual Check

Notes:
