

## Payroll Correction Form

Employee Name (please print) \_\_\_\_\_

Log # \_\_\_\_\_

Employee File # (or last 4 digits of SS#) \_\_\_\_\_

**Please correct the following payroll errors:**

<u>Date Worked</u>	<u>Show Name</u>	<u>Rate Actually Paid</u>	<u>Correct Rate</u>	<u>Payroll Rate Adjustment</u>	<u>Hours Actually Paid</u>	<u>Correct Hours</u>	<u>Payroll Hour Adjustment</u>

\_\_\_\_\_  
IATSE Representative Name

\_\_\_\_\_  
Date Submitted to SMG

\_\_\_\_\_  
SMG Representative Name

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Payroll Representative Name

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
SMG Representative Name

\_\_\_\_\_  
Date Responded to Employee/IATSE

### Employee Contact Information

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_