

University of Missouri  
**PAYROLL CORRECTION FORM - Salaried Employee**

<b>Employee Information</b>	
Employee Name	
Emplid	
PPE date*	
Pay Check Date	

\*One form for each pay period needing correction

<b>For Office Use Only</b>	
PAYSHEET#	
MANUAL CHECK#	
PAY GROUP	
PAF/APF KEYED	

*ORIGINAL ENTRY (what initially processed through payroll)*

<b>Emplid-Rcd#</b>	<b>EARN CODE</b>	<b>AMOUNT</b>	<b>BUS UNIT</b>	<b>DEPT</b>	<b>JOB CODE</b>	<b>MoCode</b>	<b>ACCOUNT</b>

*CORRECT ENTRY (what should have processed through payroll)*

<b>Emplid-Rcd#</b>	<b>EARN CODE</b>	<b>AMOUNT</b>	<b>BUS UNIT</b>	<b>DEPT</b>	<b>JOB CODE</b>	<b>ACCOUNT</b>

TOTAL EARNINGS AMOUNT CHANGE (SHOULD BE ZERO)

<b>REASON FOR REQUEST - Check all boxes that apply &amp; explain in additional comments</b>	
<input type="checkbox"/> Empl Record correction	<input type="checkbox"/> Job Code correction - note: PS account code must correspond with job code.
<input type="checkbox"/> Earnings Code correction	<input type="checkbox"/> Other - give details

<b>ADDITIONAL COMMENTS</b>

\*NOTE: Changes in funding only must be processed according to Accounting Policies & Procedures