TIME CLOCK PROBLEM FORM

Date of Problem _____ Employee No.: _____ Job Code: _____

Please check the type of issue and report the time using both hours and minutes for the entire day.

For start/end of shift: Hr.   Mins.

    Missed punch in   Time to be punched in   ____:____   a.m.   p.m.

    Missed punch out   Time to be punched out   ____:____   a.m.   p.m.

For break or lunch: Hr.   Mins.

    Missed punch out   Time to be punched out   ____:____   a.m.   p.m.

    Missed punch in   Time to be punched in   ____:____   a.m.   p.m.

Other problems: _____

I, _____ verify that the above information is correct and accurate.
                (Print name)

_____   _____
           (Signature)   Date

Correction made by _____   _____
                                                Date