

Midway Truck Center

Manual Time Edit Form

Employee Name: _____
Employee File #: _____
Reason for Edit: _____

Edit Details

Date Being Edited: _____
In Time: _____
Out Time (Lunch): _____
In Time (Lunch): _____
Out Time: _____
Other: _____
Other: _____

Employee Statement: I agree that the time edit above is accurate and will result in my being properly paid for all hours worked on the dates indicated. I understand that the failure to properly record my time worked, such as not clocking in or out at the start or end of my shift or failing to clock out and in for meal breaks, may result in corrective action. I also understand that I am never to work "off the clock" and that all time worked in addition to my regularly scheduled hours must be approved by my supervisor in advance. I understand that I am to report all significant interruptions to unpaid meal breaks to my supervisor.

Employee Signature: _____

Supervisor Signature: _____

Manager Signature: _____

Edit Completed By: _____ Date: _____