	/C Rule 660.	Payroll information correct in accordance with B/C Rule 660. UTHORIZED SIGNATURE	ct in accon	nature	Payroll information of AUTHORIZED SIGNATURE	Pay AUTH								FROM (Agency Name)	DM (Agen
I HEREBY CERTIFY THAT THE EMPLOYES NAMED ABOVE IS ENTITLED TO THIS PAY BASED ON THE APPROPLIATE GOVERNMENT CODES AND/OR EMPLOYEE HAS BEEN NOTIFIED OF THE IMPENDING ACCOUNT RECEIVABLE. PRIOR TO SUBMITTING THIS AT AIR, THE EMPLOYEE WAS GIVEN A REASONABLE TIME TO RESPON:	SQ112	HE EMP. PROPI FIED O SMITTIN	THAT II. V THE A. EN NOIL R TO SUL RLE TIME	CERTIFY BASED OI E HAS BE LE. PRIOI EASONAI	I HEREBY CI THIS PAY BA EMPLOYEE RECEIVABLI GIVEN A RE		EIVABLE NI	NON NON	BEGINNIN 12 OF ACC	(NO.) DEDUCTIONS BEGINNING WITH PAY PERIOD MM / YY 2% OF SALARY RATE OR 1/12 OF ACCOUNTS RECEIVABLE NET TELEPHONE NUMBER AND EXTENSION	2% OF S	e) = KED BY:	AGENCY COLLECTION PAYROLL GEDUCTION (Specify type) 1 DEDUCTION FROM NEXT APPLICABLE PAY PERIOD COMPLETED BY	AGENCY COLLECTION PAYROLL GEDUCTION (Specify) 1 DEDUCTION FROM NEXT APPLICABLE PAY PERIOD COMPLETED BY	AGENCY COLLI PAYROLL DEDUCT APPLICAT COMPLETED BY
										COMPLETE					PMT.
															SCO WRNT.
									L=019	COMPLETE					1.5
NE PA		Š.	GROSS	ARNINGS I.D. SHIFT CODE	PAY SUFFIX ADJ. CODE	GROSS TYPE PMT. TYPE	APPT. FRAC.	DAYS HOURS	TIME V	SALARY	SALARY TYPE	PAY PERIOD	ISSUE DATE	MO. D	POSITION
12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	7 18	15	12 13 14	8 9 10 11	DATES/HOURS ON DOCK:	PES/HOU				REVERSE AGENCY COLLECTION AIR	REVERSE AGEN		REDEPOSIT WITH AIR TRANSFER OF FUNDS WITH AIR	REDEPOSIT WITH A/R TRANSFER OF FUNDS	(6) RE
-\$XX.XX.XX. -\$XXXX.XX -\$XXXX.XX		, AID	LESS STATE PAID ADJUSTMENT	ADJUS			N III	2 2	₫ •• ••	REVERSE PAYROLL DEDUCTION AIR PLEASE REFUND AMOUNT COLLECTED OVER-COLLECTION OF PAYROLL DEDUCTION AIR - PAY PERIODS OF DEDUCTION PLEASE REFUND AMOUNT COLLECTED	PLEASE REFUN OVER-COLLECT NR - PAY PERIC PLEASE REFUN	ONS	(5) ESTABLISH/CORRECT/ADJUST AS INDICATED BELOW: ACCOUNTS RECEIVABLE REVERSE AR	RETIREMENT DEI ESTABLISH/CORRECT/A AS INDICATED BELOW: ACCOUNTS RECEIVABLE REVERSE A/R	RETIR ESTABI
	~	SE PAY	STATE PAY MILITARY BASE PAY	STAT			NET NET	_ 	S S	DEDUCTION - BALANCE TO BE COLLECTED TROM PAYROLL DEDUCTION TO ASENCY COLLECTION - BALANCE TO BE COLLECTED	FROM AGENCY DEDUCTION - B FROM PAYROLL COLLECTION - L	S USPS	BENEFITS W-2/Non USPS		PAYROLL DISABILITY
			2			RKS:	REMARKS:		TION	CHANGE METHOD OF COLLECTION	ANGE ME		TION:	PPSD UNIT DESTINATION:	SD UNI
	\times	XXX	_		Ħ	COMPLETE	CO			999-99-9999	999	T	SERVICES	PPSD/PAYROLL SERVICES	PPSD
POSITION NUMBER	NO I	(4) AGENCY	,			NAME	3		(3)	SOCIAL SECURITY NUMBER		FICE: (2)	(1) TO STATE CONTROLLER'S OFFICE: ADMIN. & DISBURSEMENTS	ATE CONTI	TO ST/
DOCUMENT NUMBER								LE (A/R)	CEIVAB	-ACCOUNTS RECEIVABLE (A/R)	1	NT NOT	STATE OF CALIFORNIA - STATE CONTROLLER'S OFFICE PAYROLL ADJUSTMENT NOTICE STD. 674 AIR (REV. 3/2008)	STATE OF CALIFORNIA - ST PAYROLL AD. STD. 674 AIR (REV. 3/2008)	AYRC

STATE OF CALIFORNIA PAYROLL ADJUSTMENT NOTICE

(A)	(3)	(3)	(1) TO STATE CONTROLLED'S
DOCOMENT NO.			
DOCUMENT NO			STD. 674 (REV. 10-2000)
		CICE	TATACET AUGCOTRICATION

FROM: (7) FORM COMPLETED BY: œ 1 PAYMENT SHOULD BE Þ UNDERPMT. PAYMENT PER SCO WARRANT REGISTER PPSD/PAYROLL OPERATIONS ADMIN. & DISBURSEMENTS ✓ PAYROLL PPSD UNIT DESTINATION: (AGENCY NAME) W-2/Non USPS MISC. DEDUCTIONS BENEFIT DEDUCTIONS RETIREMENT DISABILITY GARNISHMENTS 20-4-00 P MO. ISSUE DATE DY. ¥ \exists 999-99-9999 (5) (2) CORRECT/ISSUE PAYMENT AS INDICATED BELOW: PAY PERIOD ADJUSTMENT REQUEST RETURN WARRANT ONLY M ⊙. SOCIAL SECURITY
NUMBER PAYMENT REQUEST TRANSFER OF FUNDS SALARY ___ TIME X TELEPHONE NUMBER AND EXTENSION SALARY TYPE Complete Complete Complete SALARY FULL COMPLETE (0) STD. DYS. DATES/HOURS ON DOCK: PAY FREQUENCY REMARKS: TIME WORKED TOTAL ADJUSTMETN TOTAL STATE OWES EE \$\$\$\$\$ LESS STATE PAID EE LESS MILITARY PAY TOTAL STATE SALARY \$\$\$\$\$ MONTHLY SEMI MONTHLY BI WEEKLY HOURS NAME AUTHORIZED SIGNATURE I HEREBY CERTIFY THAT THE EMPLOYEE NAMED ABOVE IS ENTITLED TO THIS PAY BASED ON THE APPROPRIATE GOVERNMENT CODES.

Bodding Control of the APPT. FRAC. **GROSS TYPE** 7 0 PMT. TYPE PAY SUFFIX \$\$\$\$\$ \$\$\$\$\$ ADJ. CODE \$\$\$\$\$ (note if EE was over paid use 674AR) Payroll information correct in accordance with B/C Rule 660. 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 EARNINGS ID INTERMITTENT SHIFT CODE GROSS 2 XXX (4) AGENCY **NET PAY** XXXX POSITION NUMBER XXXX WARRANT NO ACCT. REC. DATE XXX RELEASED SERIAL HELD BY CONTROLLER

6)