

NC STATE UNIVERSITY

Campus Box 7233
Raleigh, North Carolina 27695-7233

919.513.3548 (phone)
919.515.4320 (fax)
919.515.4274(TDD)
<http://www7.acs.ncsu.edu/hr>

Month/Day/Year

To: Payroll Supervisor

From: *Your Name*
Your Position

Subject: Overdrawn Leave

Please deduct *XX.XX* hours of overdrawn sick leave and *XX.XX* hours of overdrawn annual leave from the *Month* payroll of *Employee Name*, *PS Employee ID #XXXXXXXXXX*. This will be a total reduction of *XX.XX* hours. If you have any questions, please call me at *XXX.XXXX*.