INJURY PAY WORKSHEET

NAME:_____EIN:_____PAYROLL:_____-_____

EMPLOYEE'S STATUS (DAY BEFORE THE WAITING PERIOD)

BASE_____LONG____EDUC____PROF____LANG____HAZ____SUPP____TOTAL_____

BENEFITS APPROVED FROM: TO:

TOTAL INJURY HOURS APPROVED:

LEAVE USED DURING BENEFIT PERIOD COVERED BY INJURY PAY, WHICH IS TO BE RESTORED.

NSA
OSA
VA
PA
CTA
DL

VACATION ERRONEOUSLY CREDITED DURING BENEFIT PERIOD COVERED BY INJURY PAY.

VC

HOURS NOT COVERED BY USE OF AVAILABLE LEAVE DURING THE BENEFIT PERIOD.

PLUS HRS _____@ $_____ "INJ"

SUMMARY

Pay Period	**Injury Hours**	**NSA**	**OSA**	**VA**	**PA**	**CTA**	**DL**	**VAC Credit (VC)**	**Remarks FMLA/HOL**

COMMENTS:____INJ HOURS:_____INJ PLUS HOURS:_____
LESS HOURS: _____VA:_____VC: _____FMLA HOURS:_____
_____
_____

Note: Less hours may be needed for current pay period