STATE OF CALIFORNIA

PAYROLL EXCEPTIONS REPORT

STD 666 (REV. 10/2019)

Enter "Actual Time Employed" in Column 5 if different than "Time Paid" shown on Payroll. If no differences exist, confirmation of Payroll may be noted on Attendance Report. If entries are required in Column 5, Items 10, 11, and 12 must be completed and the Original Copy, properly certified, sent to the Division of Disbursements. Attach or cite supporting documents when necessary.

EXPLANATION OF CODE USED IN COLUMN 8:

CODE 1 - Warrant for time shown in Column 6 released to employee. Adjustment to be made in accordance with documents cited or attached.

CODE 2 - Warrant returned to Controller by Agency. Adjustment to be made in accordance with documents cited or attached.

CODE 3 - Warrant redeposited by Controller.

(1) LINE	(2) EMPLOYEES SOCIAL SECURITY NUMBER	(3) EMPLOYEE'S NAME	(4) POSITION		(5) ACTUAL TIME EMPLOYED PER CERTIFIED ATTENDANCE REPORT				(6) TIME PAID PER WARRANT REGISTER				(7) PAYROLL WARRANTS LISTED BELOW HAVE BEEN WITHHELD AS NOTED IN COLUMN 8		(8) DISPOSITION OF WARRANT. ENTER APPROPRIATE CODE	(9) REMARKS
			CLASS	SERIAL	STANDARD SCHED TIME	LESS THAN FULL SCHEDULED TIME DAYS	LESS THAN FULL SCHEDULED TIME HOURS	TIME-BASE	STANDARD SCHED TIME	LESS THAN FULL SCHEDULED TIME DAYS	LESS THAN FULL SCHEDULED TIME HOURS	TIME-BASE	NET AMOUNT	WARRANT NUMBER		
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																

NOTE: Entry of time worked on STD. 666 is only certification of time. It is not a Request for Payment. Necessary documentation (e.g., STD. 603, STD. 674, PAR/PPT) must also be submitted. If warrant is being returned due to Garnishment, STD. 674 - ATTN: GARNISHMENT UNIT - must be attached to STD. 666.

ORGANIZATION		PAY PERIOD										
AGENCY	REPORTING UNIT	T	MO.	YR.	(10) **TOTAL OF DIFFERENCES** *(Sum of entries in columns 5 and 6)*							
					(11) **TOTAL TIME REPORTED** *(Col. 5 from Attendance Report, Col. 6 from Payroll.)*							
					(12) **RECONCILIATION** *(Time reported minus total of differences)*							

(13) I certify that data stated herein is correct, complete, and in accordance with all laws and regulations, and reconciles the attendance report and related payroll for the pay period.

AUTHORIZED SIGNATURE

DATE SIGNED

TELEPHONE NUMBER

( )