

PAY - IN CORRECTION FORM

Date _____

To: Wood County Auditor's Office

From: _____

Pay - In Number: _____ **Pay - In Date:** _____
Reason for Correction: _____

From (-):		Amount	To (+):		Amount
Revenue			Revenue		
Code			Code		

Pay - In Number: _____ **Pay - In Date:** _____
Reason for Correction: _____

From (-):		Amount	To (+):		Amount
Revenue			Revenue		
Code			Code		

Posted By:	_____
Date Posted:	_____

Signature of Elected Official or Department Head