



# Payroll Payment Request

## INSTRUCTIONS:

This form is used to request payment for Vacation/Sick Leave or **extra pay for a single activity**. Please complete all sections that apply including the explanation for the payment. The completed form must include an approval signature. If the payment is for Vacation/Sick Leave, attach Time Off Balance form (from Workday) and a copy of the Monthly Vacation/Sick Leave Payout Calculation.

**\*\*Note to HR Contacts: When you send this form out for approval, please include a note to let the Budget Director know who to return the form to.**

**The employee's Primary department will key the supplemental payment, except Vacation payouts which go to Payroll. \*\***

ADLOC #	ADLOC NAME					
UIN	EMPLOYEE NAME	GROSS PAY DUE	DATE FROM	DATE THRU	ACCOUNT NUMBER	
PIN	TITLE NAME					
<i>Use the space below to provide a detailed explanation/justification of the payment requested. Attach any additional documentation that supports this payment request.</i>						
<b>Explanation of Payment:</b>						
I certify that I am acquainted with the employee listed on this Monthly Supplemental Form or that I have received necessary details from persons privy to and technically qualified to substantiate effort distribution, and that to the best of my knowledge and belief, the employee is entitled to the payment shown on this form and that the distribution of pay between the departments and projects is true, correct and properly presented by the percentage of effort indicated.						
_____ Date Department Head			_____ Date Vice President			
_____ Date Account Manager			_____ Date Director of Budgets			
Privacy Notice: State law requires that you be informed that you are entitled to: 1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); 2) receive and review that information; and 3) have the information corrected at no charge. To request this information, contact Payroll Services using the information below.						
<b>Payroll Services</b>  Payroll Services Texas A&M University-Texarkana <a href="mailto:payroll@tamut.edu">payroll@tamut.edu</a>				<b>SUBMIT FORM</b>  Once this form has approvals, forward to the <b>HR Contact</b> in the department responsible for the employee's Primary job Revised 03/20/2019		
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