Harvard School of Engineering and Applied Sciences
Accounting Office   <u>One Time Payment</u>

Use this form to request Supplemental Payments for Harvard paid employees. The payment will be added to the employee's next regular paycheck.

Employee Name:	HU ID#:	(Rec # payroll use) 0
Employee's Home HR Department: _____SEAS_____	**Job Code/Title**	
Earnings Code: Frequently used – **LRB** late reimbursement **SMR** Summer supplemental salary **MVN** Moving expenses *Link to additional earnings codes* **https://oc.finance.harvard.edu/how-to/earning-or-job-codes**	**Reason or Business Purpose:**	
Off Cycle Check?		

Earnings Amount				**$**			Seq # 1

Tub	Org	Obj. Code	Fund	Activity	Subactivity	Root
		Defaults from Earnings Code Can't enter				

Earnings Amount				**$**			Seq # 2

Tub	Org	Obj. Code	Fund	Activity	Subactivity	Root
		Defaults from Earnings Code Can't enter				

Earnings Amount				**$**			Seq # 3

Tub	Org	Obj. Code	Fund	Activity	Subactivity	Root
		Defaults from Earnings Code Can't enter				

TOTAL Payment Amount	**Gross up**: No

Preparer	Name		Date	
	Signature			

Account Approver/RPM (AD for Area Funds)	Name		Date	
	Signature			

Area Approval/ADRAF (AD for Area Funds)	Name		Date	
	Signature			

Controller (required for 90+ reimbursements)	Name		Date	
	Signature			

Send this form to: SEAS Payroll Office, payrollhelp@seas.harvard.edu.