UCSF PAYROLL/PERSONNEL

RETROA	CTIVE	PAY
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UPAY 670-2 (R3/14) # 33806 / 71455-254

Signature

(please type or print name)

DEPARTMENT		
PREPARED BY	·	
3OX #	TELEPHONE	

						# 33806 / /1455-254								1	2	3	4	5				
EMPLOY	EE ID	TR CODE	BU	FUND	DEPT ID	PROJECT	FUNC	FLEXFIELD	SUB	EMP REL	APPT TYPE	DUC	TITLE CODE	DESC SERV	AMOUNT / RATE	S	TIME	H/ %	PAY PERIOD END (MM/DD/YY)	РС	RAI	WSP
1-9		10	19	20-25	30-34	35-40	41-42	43-49	50	81	82	83	50-53	54-56	57-63	64	65-69	70	71-76	77	78	79
		RA																			Α	
		RA																			Α	
		RA																			Α	
		RA																			Α	
		RA																			Α	
		RA																			Α	
		RA																			Α	
1 2 3 4 5	places; Monthly Rate 2 decimal places. Example: Hr = 15.0000; Mo = 2300.00. If the amount is negative, write "-" in the S box. Time: The same amount of time is entered as was report on the original payment transaction. If entering time as "Hours", use two decimal places. If entering time as "%", enter with four decimal places. H/%: H is entered for hours and % is entered for percent time. Pay Period End Date: Enter the date to which this action applies.																					
				e payments									Signature	9	(please type or	prin	t name)					

New rate:

Difference:

Old rate:

EMPLOYEE NAME