

## **AUTHORIZATION FOR EMERGENCY PAY & OVERTIME**

PAYROLL SERVICES

**HUMAN RESOURCES & PAYROLL SERVICES** 

25800 Carlos Bee Blvd SA 2600 Hayward, CA 94542

510-885-3651/ Fax 510-885-2758

Instructions: Complete and submit to Payroll Services, SA 2600 to generate pay. Indicate the Date, Start and End times, total hours per day, check Call Back when appropriate, Holiday OT (UPD ONLY), and select Premium or Straight overtime rate. \*Call Back hours should be reported on two lines when two rates apply. Always report Premium and Straight overtime rates separately. Emergency Pay applies to CSUEU and Teamsters 2010 employees only.

| EMPLOYEE NAME                                      |             |        | PEOPLESOFT EMPLOYEE ID R |           |                                       | RCD # | SSN (Last 4)      | DEPT. ID NUMBER | PAY PERIOD     |       |
|--|-------------|--------|--------------------------|-----------|---------------------------------------|-------|-------------------|-----------------|----------------|-------|
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 | Month:         | Year: |
| Date   | Time of Day |        | Total Hours              | Call Back | Holid                                 |       | Select Overtime R |                 | Special Notes: |       |
|  | Start       | End    | Total Hours              | Hours*    | (UPD Only)                            |       | OR Emergency P    | ау              |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             | TOTALS |                          |           |                                       |       |                   |                 |                |       |
| _  | L           |        |                          |           |                                       |       |                   |                 |                |       |
| OVERTIME HOURS HAVE BEEN WORKED AS INDICATED ABOVE |             |        |                          |           |                                       |       |                   |                 |                |       |
| REASON FOR OVERTIME OR EMERGENCY HOURS/NOTES:      |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
| Employee's Signature                               |             |        | Date                     | Арр       | Appropriate Administrator's Signature |       |                   | e               |                | Date  |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          |           |                                       |       |                   |                 |                |       |
|  |             |        |                          | Print     | Print Name                            |       |                   |                 |                |       |