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**](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 |  | | | |  | |  | |  |
| TOTAL Payment Amount | | | | | | | | Gross up: No | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Reimbursee  (Late reimbursements only) | Signature |  | Date |  |
| 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 or Associate Director of Financial Operations (required for 90-182 day reimbursements) | Name |  | Date |  |
| Signature |  | | |