

**TEXAS A&M UNIVERSITY SYSTEM**  
**HEALTH SCIENCE CENTER**  
**PAYROLL SERVICES**

**PROCEDURE FOR TRANSFER OF A PRIOR PAYROLL EXPENSE**

This procedure sets guidelines for requesting a transfer of payroll costs to another account.

**1. REQUEST**

All requests to transfer payroll costs must be submitted to Payroll Services using the form "REQUEST FOR TRANSFER OF PRIOR PAYROLL EXPENDITURE".

**All information requested on the form must be provided. *Incomplete requests will be returned to the department.***

- Employee information (Name, UIN and PIN)
  - Pay Periods to transfer
  - Transfer from account(s) - including Gross amount (***salary only-no longevity***)
  - Transfer to account(s) - including Gross amount (***salary only-no longevity***)
  - Reason for transfer
- If a Research Foundation account is involved, list RF account(s) and the amount of salary that applies to each one.***
- Approval by Department Head
  - If needed, additional approvals for accounts pertaining to either the Transfer From or Transfer To (Research Foundation, other system parts, etc). ***These must be obtained prior to submission of the request to Payroll Services.***

**2. FORM 500**

***Retroactive Form 500s changing the paying source for a position will no longer be processed.*** All approvals for paying source changes involving prior month's expenses will be obtained on the "REQUEST FOR TRANSFER OF PRIOR PAYROLL EXPENDITURES".

***If the change in paying source applies to the current or future months, an EPA or Form 500 effective the first day of the current pay period must be processed.***

**3. VOUCHER DETAILS**

Copies of Voucher Details ***need not be*** submitted with your request.

**4. DUE DATE**

Requests must be received by Payroll Services by 5:00 P.M. on PPR due dates (usually Thursdays) to be processed with that Biweekly payroll.

**5. CONTACT**

Contact Payroll Services at 458-7274 or 458-7272 should you have any questions.

**TEXAS A&M UNIVERSITY SYSTEM  
HEALTH SCIENCE CENTER  
Payroll Services**

**REQUEST FOR TRANSFER OF PRIOR PAYROLL EXPENDITURES**

**FROM**

Dept. \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

**Please transfer prior payroll expense for the following employee:**

Name \_\_\_\_\_ UIN \_\_\_\_\_ PIN \_\_\_\_\_

**PAY PERIODS TO TRANSFER**

CYCLE (B or M)	PAY DATE	VCHR #

CYCLE (B or M)	PAY DATE	VCHR #

**TRANSFER FROM:**

Pt	Acct	S-A	Pgm	Acct Anal	Obj	Title Cd	Gross Salary Amt.

**TRANSFER TO:**

Pt	Acct	S-A	Pgm	Acct Anal	Obj	Title Cd	Gross Salary Amt.

**REASON FOR TRANSFER**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPROVAL**

I certify that I am acquainted with the employee listed on this payroll transfer request or that I have received the necessary details from persons privy to and technically qualified to substantiate effort distribution. And that to the best of my knowledge and belief, the requested distribution of pay between accounts is true, correct, and properly represented as indicated, unless subsequent notice is given by me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head

**Additional Approval (if applicable)**

\_\_\_\_\_  
Research Foundation

\_\_\_\_\_  
Other