COMMUNICATION SKILLS
&
INTERNAL CONTROLS / AUDIT TRAILS

Understanding Your Role as a Payroll Manager

September 19, 2022

By Lynn Buch

Communication Skills

- Top Quality Communication Skills
  - The imparting or exchanging of information
  - The **successful** conveying or sharing of ideas or information
  - Means of **sending** and **receiving** information

- Team Approach

  The **TEAM** is counting on **YOU - Payroll Manager**!
  - Board of Education
  - Superintendent
  - School System Administration
  - Chief School Finance Officer
  - Human Resource Personnel
  - Payroll Department Personnel
  - Board Employees

  78% to 80% of the Budget is Payroll

Communication Skills

- **Preventing and Addressing Conflict**

MOTIVATION OR REASON TO COMMUNICATE

- **Receive Information and Instructions regarding**
  - Payroll procedures and processes
  - New and/or Terminated Employees
  - Changes in laws and regulations regarding employees
  - Changes in policies and procedures specific to your Board
- **Sources of Information**
  - Human Resources
    - New hires, terminations, changes
  - Chief School Financial Officer (CSFO)
    - Budget, General Ledger Assignment, Due Dates
  - Board Minutes
    - Verify Effective Hire, Termination, Change Date
  - Employees
    - Change personal and/or tax information
    - Have questions regarding payroll amounts, insurance benefits, retirement benefits, due dates, etc.

Communication Skills

- You will PROVIDE Information to:
  - **Employees, Human Resources, Local School Bookkeepers, School Administration**
    - Changes and/or procedures for payroll
    - Time-lines and due dates
  - **Chief School Financial Officer (CSFO)**
    - Every single transaction regarding payroll involves money in some way
  - **Make your message count**
    - Strive for Quality Communication
      - Timely, Clear, Neat, and Error Free

- Feedback/Evaluation
  - **Provide Directions for Feedback**
    - Request a specific response
    - Provide a yes/no question
    - State a specific time for response

Communication Skills

- Reception:

  You are busy! Your HR Manager is busy! Your CSFO is busy!
  It is imperative the YOU control all external factors within your power to make sure YOUR message is not distorted!

  - If you are receiving the message
    - Provide feedback to the sender stating YOUR understanding of the message
  - If you are sending the message
    - Request feedback from intended recipient to ensure HIS/HER understanding
  - **KNOW YOUR JOB**
  - Prepare Yourself
    - Take advantage of all training opportunities
      - Brush up on your grammar and writing skills
    - Make sure you **practice** good communication skills

Communication Skills

- PREPARE YOUR MESSAGE
  - Message - What exactly is the message?
    - Prepare and **clearly state** the message
    - Be able to **correctly** address the issue or answer the question
    - **Do not guess!**
      - **Say "I do not have that information at hand, but I will get it for you!"**

Top Quality Communication Skills are
Vital to Your Position!

Best Practices and Suggestions

Establish the Importance/Necessity of Communication with your Payroll Bookkeepers/Clerks, HR, and CSFO.

- CSFO's approval shall be required **before** any information is released.

- Payroll Officer/Director shall **copy** CSFO on all correspondences – email or written.

- Use Email for Communication Audit Trail
  - Ask and Answer Questions by Email
  - Verify Telephone and/or Personal Conversations by Email & Vice versa

- Always be Professional and Respectful

System-Wide Notifications by Email

From: Payroll Officer
Sent: Friday, January 24, 2020 9:28 am
To: CSFO
Subject: Request to Notify Employees of Life Fringe Benefit Changes

The majority of the employee's net pay will be different on their January paycheck due to their new Life Insurance Fringe Benefit amounts.

I am requesting your approval to email the employees to notify them of the change in advance.

Thank you,

Payroll Officer

Questions and Responses by Email

From: Payroll Officer
Sent: Monday, December 16, 2019 12:17 pm
To: CSFO
Subject: Fwd: Paycheck and Leave Questions

Please advise.

---------- Forwarded message ------------

From: New teacher
Date: Monday, December 16, 2019
Subject Paycheck and Leave Questions
To: Payroll Officer

I was wondering if I could get paid early due to a family emergency.

I also don't have any leave available and would like to take a few days in advance to keep from getting my check docked. If not, can we spread it out over several checks so I can pay my bills?

Thank You,

New Teacher

Approval Requests by Email

From: Payroll Officer
Sent: Friday, September 13, 2019 1:25 pm
To: **CSFO**
Subject: Approval of New Teacher Calculation
Attachments: 9 month 189 2019-2020 Luke Bryan

Please review and approve the attached Salary Calculation for the Personnel Action approved on Board Agenda Item C-1 per our previous discussion.

Thank you,

Payroll Officer

Always be Professional and Respectful

"Some complaints have come in about your method of reminding people to hand in timesheets."

Best Practices and Suggestions

Segregation of Duties

- Reduce fraud

- Catch unintended errors

Payroll Director/CSFO oversees the payroll process from start to finish.

- Payroll Officer reviews Board Approved Personnel Actions with Payroll Director/CSFO.

   - New Hires, Status Changes, Terminations, Transfers, etc.

- Payroll Officer/Director provides CSFO Payroll Reports to Approve Before Processing ACH file or Payroll Checks.

   - Prior Period Comparison Report & Payroll Register

- Payroll Director/CSFO uploads and/or approves ACH file at the Bank.

- Payroll Officer provides Payroll Director/CSFO ALL Reports to Approve Before Submission.

   - Weekly, Monthly, Quarterly, Annual, etc.

- Payroll Officer/Director emails CSFO electronic copies of all Federal and State Tax Deposit Confirmations, Quarterly Tax Returns, ACA, and W2s.

Personnel Action Sheet

			Position	School	Effective	Salary	
PERSONNEL ACTION SHEET							
			February 18, 2020			APPROVED 2.18.2020	
			Position	School	Effective	Salary	
RESIGNATION							
A		Mallory	Inst Ast	HMS	12.31.19		
A		Sarah	1st	SC	5.22.20		
RETIREMENT							
B		Bill	Superintendent	District	6.30.20		
B		Randy	Electrician	District	6.30.20		
EMPLOYMENT							
C		Mallory	SS	HHS	1.3.20	B/1	Linda
C		Kristen	Inst Ast	HHS	1.24.20		Adjust start date from 1.21.20 PAS
LEAVE OF ABSENCE							
D		Lauren	Math	HHS			Orig Rqst ap'd 9.10.19
			Maternity Lv March 9 - May 22, 2020				
D		Carla	CNP	HMS			Orig Rqst ap'd 1.21.20
			Catastrophic leave extended through Feb. 7, 2020				
CHANGE OF CONTRACT							
E		Donna	CNP	HHS	1.3.20		Adjust start date from 12.17.19 PAS
			From CN/W/15 to CN/W1/15 based on program need				
SUPPLEMENTS							
F		Robin	Instructional Support		$2,139		Feb - May, 2020
F		Jordan	Extracurricular Support		$2,139		Feb - May, 2020
F		Myron	HS Indoor Track Asst.		$1,039		Feb - August, 2020
F		David	MS Cross Country		$1,070		Feb - August, 2020
F		Logan	Varsity Girls Bkbl Ast. Coach		$2,139		February, 2020

Personnel/Payroll Data Form

City Schools

Applicant/Employee Personnel-Payroll Data

EMPLOYMENT	REASSIGNMENT	CERTIFIED	CONTRACT	RESIGNATION	TERMINATION	**EFFECTIVE DATE**
SUPPLEMENT	HIGHER DEGREE	SUPPORT	EDP	RETIREMENT	NON-RENEWAL	
TRANSFER	SDE APPROVED	ADMINISTRATIVE	CNP	FMLA	LEAVE OF ABSENCE	

APPLICANT INFORMATION

NAME	PERSON ID
Print or Type name as it appears on the Social Security Card	TRS Retiree ☐ YES ☐ NO
ADDRESS	Employee w/RSA Agency ☐ YES ☐ NO
	Employed By
CITY STATE ZIP	AL CERTIFICATE ☐ YES ☐ NO
PHONE	
	NATIONAL BOARD ☐ YES ☐ NO
CELL PHONE	HIGHEST DEGREE: ☐ BA ☐ MA — Add'l Hours ☐ NONE ☐ +12
GENDER RACE	☐ AA ☐ DR — ☐ +24
SOC SEC #	Years of Experience: Homewood, Other Alabama, Public Out of State, Private, Other Classified

VACANCY

POSITION	☐ YES ☐ NO New Position
LOCATION	Person Leaving
FULL TIME ☐ YES ☐ NO % of FT =	If New Unit, Please Explain
CONTRACT: 9 MO 10 MO 11 MO 12 MO	

ANNUAL SALARY	SALARY SCHEDULE		CLASSIFIED RATE/HOUR	☐ LETTER OF APPOINTMENT
	RANK	STEP		DATE_____
$			$	

PERSONNEL DEPT

SUPPLEMENTS	COMMENTS
$	
$	
$	
$	
$	
$	
$	
$	DIRECTOR OF PERSONNEL
$	

FINANCE DEPT

GL ACCOUNT DISTRIBUTION	EMP #
SALARY SCHEDULES	# DAYS FTE EMP TYPE
	NextGen Updated ☐_____
	APPROVED - CHIEF FINANCIAL OFFICER

Federal Tax Deposit Confirmations by Email

Alabama Tax Payment/Return Confirmations by Email

From: Payroll Officer
Sent: Tuesday, March 3, 2020 3:45 pm
To: **CSFO**
Subject: Fwd: Payment & Return Submission Confirmation

---------- Forwarded message ----------
From: <TaxpayerService@revenue.alabama.gov>
Date: Mon, Mar 2, 2020 at 9:34 AM
Subject: Payment Submission Confirmation
To: **Payroll Officer**

ALABAMA
DEPARTMENT OF
REVENUE

Your payment of $108,668.18 has been submitted for account WTH-****9115**

The payment will be posted to your account after your request is processed in the next couple of days.

Your request number is 1-779-188-928.

---------- Forwarded message ----------
From: <TaxpayerService@revenue.alabama.gov>
Date: Mon, Mar 2, 2020 at 9:34 AM
Subject: Return Submission Confirmation
To: **Payroll Officer**

ALABAMA
DEPARTMENT OF
REVENUE

Your 29-Feb-2020 return has been submitted for account WTH-****9115**

The return will be posted to your account after your request is processed in the next couple of days.

Your request number is 0-791-891-264.

RSA Confirmations by Email

An important message from the Retirement Systems of Alabama (RSA) ⟩ PAYROLL 2020 ✕

noreply@rsa-al.gov   Mon, Mar 2, 7:14 PM (8 days ago)   ☆   ↰ Reply   ⋮

March 2, 2020HOMEWOOD CITY BOE - THOMRE: Contribution Report Processed Successfully   The Contribution report 64242 submitted to the RSA through the Employer Self-Service (ESS) Portal on February 26, 2020 has been processed successfully. If you need assistance using the ESS Portal or have any questions about your report, please contact RSA Employer Services at employer.services@rsa-al.gov or call us at (334) 517-7005.Thank You,RSA Employer Services**Please do not reply to this email. This is an automatically generated message.**

RSA CONFIDENTIALITY NOTICE: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure, or distribution is prohibited. If you are not the intended recipient, please contact the sender by return e-mail and destroy all copies of the original message.

An important message from the Retirement Systems of Alabama (RSA) ⟩ PAYROLL 2020 ✕

noreply@rsa-al.gov   Wed, Feb 26, 10:52 AM (13 days ago)   ☆   ↰ Reply   ⋮

February 26, 2020

HOMEWOOD CITY BOE - THOM

RE: Enrollment Report Processed Successfully

The Enrollment report 64208 submitted to the RSA through the Employer Self-Service (ESS) Portal on February 26, 2020 has been processed.

If you need assistance using the ESS Portal or have any questions about your report, please contact RSA Employer Services at employer.services@rsa-al.gov or call us at (334) 517-7005.

Thank You,
RSA Employer Services

Please do not reply to this email. This is an automatically generated message.

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W2 VERIFICATION PROCESS

Ensure this Screen Print is Printed and Captured in an electronic format for Future Reference as indicated in Red below. Compare totals to all Year End Reports and W2 Submission Data to SSA thru AccuWage shown next.

AccuWage ONLINE W2 TESTING

AccuWage ONLINE W2 TESTING

Ensure these AccuWage Screen Prints are printed and captured in an electronic format for future reference. Once you receive 0 Errors , verify totals match from the Generate W2 Data above and the "RT" Record Data from the W2REPORT before your file is submitted to SSA.

Social Security
The Official Website of the U.S. Social Security Administration

AccuWage Online

⚠ **Important:** You still need to upload and submit your Formatted Wage File after testing it through AccuWage Online.

Test Results

File name: W2REPORT
File has run 100% Complete
1794 Record(s) Tested, 1 Records(s) with Issue(s)

Records

Filter record(s) by level: ❷ Issue Level Descriptions   ☐ Critical (0)   ☐ Error (0)   ☑ Alert (1)   ☐ Info (0)

Record	Issues	Record Data
2	1	RE2019 6⟶ BOARD OF EDUCATION ATTN: PAYROLL DEPT 4⟶ HOMEWOOD AL352090000S R 0Lynn Buch 2058704203 lbuch@homewood.k12.al.us 0 ⟶

Issue(s) for Selected Record # 2

Level	Reference	User Entry	Description
ALERT	Employer/Agent Identification Number (EIN) [Position 8-16]	630⟶	This alert is informational only. Submitter EIN [Position 3-11] and Employer/Agent EIN [Position 8-16] are an exact match. Please verify that you intended to have the Submitter EIN and Employer EIN match before proceeding. No further action is needed if this was intentional.

[Test Another File]   [View/Print Test Report]   [Return to EWR Home]

AccuWage Online Help Guide : EFW2 - EFW2C Specifications : AccuWage Online FAQ

W2 Electronic Wage Reporting (EWR) Submission Status

Ensure these EWR Screen Prints are printed and captured in an electronic format for future reference. Once your # of errors equals "0" and you receive "No Errors," verify totals match from the Generate W2 Data above and the W-3 Detailed Information on your Submission Status Report.

W2 Electronic Wage Reporting (EWR) Status

EWR W-3 Details

ACA Transmission Confirmation

Transmission Confirmation

Your uploaded file has been transmitted. It is **highly recommended** to print this page to keep for your records. Remember, **you must check the status** of your transmission to verify if it was "Accepted" or "Rejected."

Receipt ID: 1094C-20-00007934
Date and Time: 01/27/2020 03:14:22 PM +00:00

Your Transmitted Form File

File Name	File Size
1094C_Request_BSJKG_20200127T091130590Z.xml	3.19 KB

Transmission Status Details

Please see details for this transmission below.

Receipt ID: 1094C-20-00007934
Date and Time: 01/28/2020 07:42:30 PM +00:00
Status: Accepted

Best Practices and Suggestions

Change Authorizations/Internal Audits

- Payroll Bookkeepers, Clerks, Officers, Directors **NEVER** make changes to their own records.

  - Employee Maintenance Audit Trail Report to verify

- All Changes requested by an Employees must be submitted in writing and signed (Electronic forms and signatures are acceptable)

  - Address Changes, Withholding Allowances, Direct Deposit, Deductions, Leave Type taken, etc.

- Principals/Supervisors must approve and sign off on changes to timesheets/hours worked

  – never make changes based on employee's request alone

- Have your Payroll Director/CSFO Sign and Approve All Calculations/Prorations <u>prior</u> to payment and notification to Personnel.

  - Salary Calculation/Proration Excel Worksheets

Check Employee Maintenance Audit Trail Monthly for your Payroll Clerks/Officer's User-Id & Employee Number

Check Employee Maintenance Audit Trail Report for changes made by their own User Id

				MCAI PAYROLL SYSTEM				PREMAT
RUN DATE: 07/28/2018

RUN TIME: 05:58PM

EMPLOYEE MAINTENANCE AUDIT REPORT — Page 1 of 4

HOMEWOOD CITY BOARD OF EDUCATION

BEGINNING DATE: 06/01/2018   END DATE: 07/15/2018

EMPLOYEE: 1139 Payroll Officer   SOC.SEC.NUM: XXX-XX-XXXX   PERSON ID: 203

DATE	TIME	ACTION	TABLE & RECORD	USER ID	FIELD	OLD VALUE	NEW VALUE	TRANS	NOTICE #
07/11/2018	20:53:49.0000 000	Change	PREMPJOB- Job:2	payroll	Annual Salary	36,847.00	36,845.00	PR/EMNT	
			Employee Number: 1139 Job Number: 2						
07/11/2018	20:53:49.000 0000	Change	PREMPJOB- Job:2	payroll	Pay Period Salary	3,070.58	3,070.42	PR/EMNT	
			Employee Number: 1139 Job Number: 2						
07/11/2018	20:53:49.000 0000	Change	PREMPJOB- Job:2	payroll	Hourly/Daily Rate	153.53	153.52	PR/EMNT	
			Employee Number: 1139 Job Number: 2						
07/11/2018	20:53:49.000 0000	Change	PREMPJOB- Job:2	payroll	Overtime Rate	230.30	230.28	PR/EMNT	
			Employee Number: 1139 Job Number: 2						
07/11/2018	20:53:49.000 0000	Change	PREMPJOB- Job:2	payroll	Full Time Earnings	3,070.58	3,070.42	PR/EMNT	
			Employee Number: 1139 Job Number: 2						
07/11/2018	20:53:50.000 0000	Change	PRSSHIST11392RISP	payroll	Ending Date		7/11/2018	PR/EMNT	

Direct Deposit Authorization for Payroll

Type of authorization (select one only)

○ **NEW:** Complete and Verify Employee Information   ○ **CHANGE:** When changing your financial institution, account number, or type of account, you must complete and verify Payee information

1. Employee Name	2. Social Security Number	3. Contact Phone Number
4. Address	5. City, State, ZIP Code	
6. Work Location	7. Email Address for EFT Notification	

I hereby authorize the Homewood City Board of Education to initiate credit entries and, if necessary, debit entries to adjust for any credit entries made in error to the checking or savings account indicated. I also authorize the depositories named below to credit and/or debit the same to such account. I understand that it is my responsibility to verify deposits have been credited to my account before dispersing or withdrawing funds. Homewood City Board of Education assumes no liability for bank errors, bank fees, or overdrafts.

This authority is to remain in full force until the Homewood City Board of Education has received written notification of its cancellation in such time and manner as to afford a reasonable opportunity to act on it, or until I have been notified of the Board's or the financial institution's cancellation of this agreement.

I understand that a new authorization agreement must be completed when changing or closing the account or changing financial institutions. If any action taken by me results in non-acceptance of the electronic funds transfer by my financial institution, I understand the Homewood City Board of Education assumes no responsibility for processing replacement payment until the funds are returned to the Board by my financial institution.

NOTE: Attach voided check for checking accounts **OR** savings deposit slip for savings account.
Form cannot be processed without information below.

PRIMARY ACCOUNT:

Financial Institution:	CHECKING ○
Routing Number:	SAVINGS ○
Account Number:	

SECONDARY ACCOUNT (optional):

Financial Institution:	CHECKING ○
Routing Number:	SAVINGS ○
Account Number:	AMOUNT TO BE DEPOSITED:

I authorize Homewood City Board of Education to deposit to the account number(s) indicated above.

8. Print or Type Name of Authorized Signatory	9. Position/Title of Authorized Signatory
10. Signature of Authorized Signatory	11. Date

SALARY DEDUCTION REQUEST
EMPLOYEE DEDUCTION
ADDITION/CHANGE FORM

_____   _____
EMPLOYEE NAME   **EMPLOYEE #**

_____   _____
SCHOOL/LOCATION   **PHONE #**

NAME OF THE BENEFIT COMPANY

_____

_____   _____ - _____
Deduction # (As indicated on check stub)   **Old Amount**   **New Amount**

_____
Effective Date of Addition/Change

I understand that this change will become effective at the end of this payroll period **ONLY IF** this Addition/Change Form is received in the Payroll Department by the 15th of the current month. Any Employee Deduction Addition/Change Forms received **AFTER** the 15th of the month **WILL NOT** become effective until the next payroll period without CSFO approval.

_____   _____
Signature   Date

NO CHANGES WILL BE PROCESSED BY TELEPHONE.

SALARY DEDUCTION REQUEST
EMPLOYEE DEDUCTION
CANCELLATION FORM

_____   _____
EMPLOYEE NAME   **EMPLOYEE #**

_____   _____
SCHOOL/LOCATION   **PHONE #**

NAME OF THE BENEFIT COMPANY

_____

_____
Deduction # (As indicated on check stub)   **Amount of Deduction**

_____
Effective Date of Cancellation

I understand that this change will become effective at the end of this payroll period **ONLY IF** this Cancellation Form is received in the Payroll Department by the 15th of the current month. Any Employee Deduction Cancellation Forms received **AFTER** the 15th of the month **WILL NOT** become effective until the next payroll period without CSFO approval.

_____   _____
Signature   Date

NO CHANGES WILL BE PROCESSED BY TELEPHONE.

CITY SCHOOLS
2017-2018

PAYROLL ADJUSTMENTS
TEACHERS - 9 MONTH
9 MONTH EMPLOYEE-187 DAYS

EMPLOYEE NAME: Luke Bryan

EMPLOYEE NUMBER :   2737

DATE OF EMPLOYMENT OR REHIRE   1/5/2018
DATE OF TERMINATION
DATE OF OTHER CHANGE
DATE OF SALARY CHANGE

LOCATION: **High School**

PAYROLL CALENDAR

			AMOUNT PAID	DAYS IN PERIOD	DAYS WORKED	RATE	AMOUNT EARNED
	8/1 - 8/31			17	0	$ -	-
	9/1-9/30	SEPT		21	0	$ -	-
	10/1-10/31	OCT		21	0	$ -	-
	11/1-11/30	NOV.		16	0	$ -	-
	12/1-12/31	DEC.		15	0	$ -	-
1 ST PAYDAY	1/2-1/31	JAN		18	18	$ 193.28	3,479.04
	2/1-2/29	FEB		20	20	$ 193.28	3,865.60
	3/1-3/31	MAR		17	17	$ 193.28	3,285.76
	4/2-4/30	APR		20	20	$ 193.28	3,865.60
	5/1-5/31	MAY		22	22	$ 193.28	4,252.16
LAST PAYDAY	6/1-6/30	JUNE		0	0	-	-
	7/2-7/31	JULY		0	0	-	-
	8/31/2011	AUG				-	-
			-	187	97		18,748.16

AMOUNT EARNED   18,748.16
LESS : AMOUNT PAID   -

BALANCE DUE - NINE MONTH CONTRACT   18,748.16

MONTHS REMAINING ON CONTRACT   6

MONTHLY SALARY $ 3,124.69

COMMENTS: **SS: T Rank: II Step: 1**

DATE ENTERED IN SYSTEM:
ENTERED BY:

APPROVED BY:

Best Practices and Suggestions

Using an Automated Time System is recommended to Improve Productivity

- Eliminate paper time sheets and their retrieval and storage
- Faster turnaround time to complete payroll processing
- Managing Overtime/Comp-time electronically
- Consistent Application of Policies
- Manage Leave Approval and Balances real-time to reduce error prone leave entries
- Distribute payroll and benefit expense to multiple account codes without incurring a large data entry workload

Protection from Lawsuits:

- Electronic "time stamped" clock in and out times
- Biometric options offer guarantee that the employee was without a doubt there at that time
- Policy structure within the time system guarantees that the employee's time will be computed same as everyone in their pay classification
- Electronic Interface between time system and the payroll system eliminates key data entry error
- Audit trail within the time system guarantees that supervisor changes of any employee's time is noted in a protected audit file.

Time Card Report

Includes one single employee.

Thompson, John

Cost Center	0002		ID Number	6205
Job Class	143		Hours Per Day	0750
Employee Type	CLERICAL 12-12			

Sun Mar-01 09 to Tue Mar-31 09

Date	In	Out	In	Out	Hours	Schedule	Exceptions
Mon Mar-02 09	7:53a	12:01p	1:00p	4:30p	7.50	8:00a/ 4:30p	
Tue Mar-03 09	7:52a	11:59a	1:03p	4:30p	7.75	8:00a/ 4:30p	Arr. Early
Wed Mar-04 09	7:30a	11:30a	12:01p	3:30p	7.50	8:00a/ 4:30p	Arr. Early, Left Early
Thu Mar-05 09	8:00a	12:30p	1:30p	4:30p	7.50	8:00a/ 4:30p	
Fri Mar-06 09					7.50	Sick	
Mon Mar-09 09	8:00a	11:53a	12:55p	4:30p	7.50	8:00a/ 4:30p	
Tue Mar-10 09					7.50	Personal	
Wed Mar-11 09					7.50	X-TRAPerLv	
Thu Mar-12 09					7.50	ProfessLv	
Fri Mar-13 09					7.50	ProfessLv	
Mon Mar-16 09	7:30a	11:30a	12:30p	4:30p	8.00	8:00a/ 4:30p	Arr. Early
Tue Mar-17 09	7:45a	12:01p	1:00p	4:35p	7.75	8:00a/ 4:30p	Arr. Early
Wed Mar-18 09	8:00a	4:00p			8.00	8:00a/ 4:30p	Left Early
Thu Mar-19 09					7.50	Holiday	
Fri Mar-20 09					7.50	Holiday	
Mon Mar-23 09	8:00a	12:00p	12:30p	4:30p	8.00	8:00a/ 4:30p	
Tue Mar-24 09	7:57a	4:31p			8.50	8:00a/ 4:30p	
Wed Mar-25 09	7:55a	4:27p			8.50	8:00a/ 4:30p	Left Early
Thu Mar-26 09	8:01a	4:29p			8.50	8:00a/ 4:30p	Tardy, Left Early
Fri Mar-27 09	8:00a	4:30p			8.50	8:00a/ 4:30p	
Sun Mar-29 09	1:00p	5:00p			4.00	Unsch	Unsch.
Mon Mar-30 09	8:00a	12:05p	12:55p	4:31p	7.75	8:00a/ 4:30p	
Tue Mar-31 09	7:59a	11:45a	1:00p	4:30p	7.25	8:00a/ 4:30p	

Week 1 (Sat Feb-28 09 to Fri Mar-06 09)

0000-143-C2-01-0	Regular	30.00	.
0000-143-C2-01-0	Straight	0.25	.
0000-143-C2-01-0	Sick	7.50	.

Week 2 (Sat Mar-07 09 to Fri Mar-13 09)

0000-143-C2-01-0	Regular	7.50	.
0000-143-C2-01-0	Personal	7.50	.
0000-143-C2-01-0	ProfessLv	15.00	.
0000-143-C2-01-0	X-TRAPerLv	7.50	.

Week 3 (Sat Mar-14 09 to Fri Mar-20 09)

0000-143-C2-01-0	Regular	22.50	.
0000-143-C2-01-0	Straight	1.25	.
0000-143-C2-01-0	Holiday	15.00	.

Week 4 (Sat Mar-21 09 to Fri Mar-27 09)

0000-143-C2-01-0	Regular	37.50	.
0000-143-C2-01-0	Straight	2.50	.
0000-143-C2-01-0	OverTime	2.00	.

Week 5 (Sat Mar-28 09 to Fri Apr-03 09)

0000-143-C2-01-0	Regular	19.00	.

Period Totals

r-Job-Type-Rcrd-Emp	Pay Designation	Hours	Rate	Dollars
0000-143-C2-01-00000-000(	Regular	116.50	.	.
0000-143-C2-01-00000-000(	Straight	4.00	.	.
0000-143-C2-01-00000-000(	OverTime	2.00	.	.
0000-143-C2-01-00000-000(	Personal	7.50	.	.
0000-143-C2-01-00000-000(	Sick	7.50	.	.
0000-143-C2-01-00000-000(	ProfessLv	15.00	.	.
0000-143-C2-01-00000-000(	X-TRAPerLv	7.50	.	.
0000-143-C2-01-00000-000(	Holiday	15.00	.	.

Employee Signature X_____

Supervisor Signature X_____

REQUEST FOR TIMECLOCK OVERRIDE

All blanks must be completed on this form.

Date request form <u>completed</u> _____

Employee Name _____

Cost Center _____

Employee Number _____

Correct date should be _____
Use month-day-year format (08-01-18)

Correct time should be _____
Use hour and minute format (08:15am)

Reason for override (in detail)
_____

_____

Requesting Employee Signature _____

ALL OVERRIDES MUST BE REQUESTED AND PROCESSED **WITHIN 48 HOURS** OF THE INCORRECT OR MISSING PUNCH.   Overrides must be submitted by the requesting employee only.

_____

Do Not Write in This Space – Processing Use Only

Processed Date and Time _____
Override Code Used _____
Processing Employee Signature _____
Supervisor or Principal Signature _____

All Override Originals must be submitted to the payroll office with the payroll service report. Do not send overrides to the board office one at a time.

Payroll Use Only

Verified _____
Additional Input required _____
Payroll Signature _____

Best Practices and Suggestions

Check Payment Controls

- Enforce Mandatory Direct Deposit
  - Make Board Policy IF POSSIBLE

- Always make employees sign for "actual" checks received
  - Principals/Supervisors need a roster to sign off on the number of checks they pick up and always have an Employee Pick-up Roster for them to sign to verify they received their paycheck
  - Ensure the Rosters are returned to Payroll to file with that run

- Ensure there are Procedures in place instructing the cost center level personnel on exactly what happens with the "actual" checks remaining for absent Employees on payday.

- Use Employee Self-Service software to increase efficiency by eliminating the pick-up procedures and paper direct deposit statements and W-2's.

Example of a Board Policy for Mandatory Direct Deposit

PAYROLL

Employees may expect reimbursement for their services by direct deposit. Pay will be deposited directly into designated accounts each payday. Employees making changes to the depositing account must notify the payroll department by the 10th of the month to avoid a delay in deposit.

Salary Deductions

The Board will make salary deductions which are considered statutory, including federal income tax, state income tax, and retirement, in accordance with applicable laws and regulations. Except for deductions not covered by paid leave, required by law, and for retirement, all deductions made from salary shall be subject to Board approval and voluntary on the part of the individual employee. For all voluntary deductions, the employee shall complete a form authorizing the deduction. Approved deductions for employee organizations shall be based upon membership lists and forms provided by the respective organizations. These deductions shall be made in accordance with membership lists unless an employee revokes authorization for such deductions by providing a written notice of revocation for the ensuing year on or before September 15th. Otherwise, the deductions are continuous. Certain others, such as United Way contributions, are for a specified period and continue only as authorized by the employee.

Upon termination, amounts owed under the authorization of an employee shall be deducted from his/her final check.

Example of Pick-Up Rosters for Payroll Checks

CITY SCHOOLS
COST CENTER PAYROLL CHECK PICK-UP ROSTER
PAYROLL: JULY 31, 2018

TOTAL RECEIVED	NAME	SIGNATURE
9	ELEMENTARY SCHOOL	
18	MIDDLE SCHOOL	
30	HIGH SCHOOL	
8	MAINTENANCE	
10	CENTRAL OFFICE	

ELEMENTARY SCHOOL
EMPLOYEE PAYROLL CHECK PICK-UP ROSTER
PAYROLL: JULY 31, 2018

NUMBER	NAME	SIGNATURE
3368	ALDEAN, JASON	
3472	BRYAN, LUKE	
3201	CHURCH, ERIC	
2154	COMBS, LUKE	
3118	MORRIS, MAREN	
2349	RUCKER, DARIUS	
3243	SCOTT, HILLARY	
1157	SHELTON, BLAKE	
2196	WALLEN, MORGAN	

Employee Self Service

Employees can…

- access from any computer.

- view their elected withholding, earnings summary, check history, company documents, leave balances and leave history.

- Request changes to their demographics, direct deposits, W4 and A4.

- print past check information

- print W2s

- view and print the annual Truth in Salary letter and 1095-C.

Employee Self Service-Edit/Enter Direct Deposit

Employees can submit requests to add, delete, or change direct deposit accounts. All changes must be validated with a PIN that is emailed to the employee's ESS email. Once the valid PIN is submitted, the request for changes will be submitted for approval.
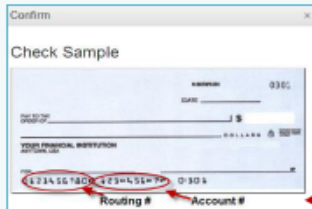
If changing a routing number or the amount to deposit, click in the field, make the change and click save.
If adding a new account, click on *Add New Record*, enter the information for the new account and click save. Note: There can be only one primary account per employee.
If you are trying to delete a direct deposit, click on the *Delete* button beside the account information and then click save.

Employee Self Service-Edit/Enter Direct Deposit

Pending changes are displayed and employees can upload files for direct deposit requests.

If employee has a pending request, their direct deposit information will be displayed with the requested changes. The employee can change all pending direct deposit data.

Multiple files can be selected from multiple directories. Acceptable file formats include .gif, .jpg, .jpeg, .png, .doc, .docx, .xls, .xlsx, .pdf, .txt.

Employee Self Service–Personal/Payroll Changes

The Personal menu contains the sub-menu for Payroll Changes which includes a menu of all change options available to the employee.

Personal	Leave	Docum

Payroll Inquiry

Deductions Inquiry

Earning Summary (YTD totals)

View Pay Checks

Payroll Changes

Demographics

Enter/Edit Direct Deposit

Tax Withholdings

MS-4

W-4
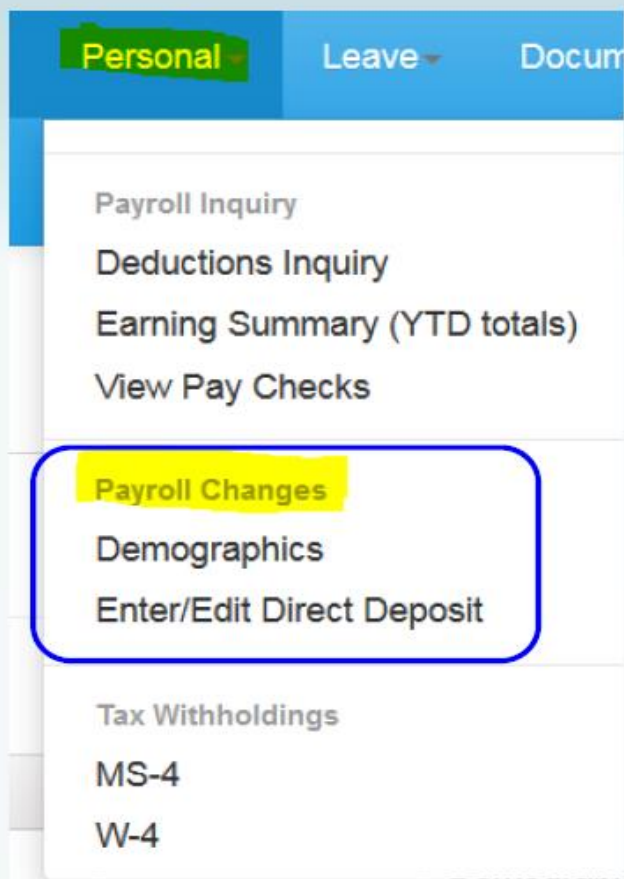
Employee Self Service - Demographics

Employee can request changes to a variety of demographic fields and upload multiple documents to be submitted with their change request. Both the employee and the approver can print the attached documents from the pending or completed request/task.

If employee has a pending request, their demographics will be displayed with the requested changes. The employee can change all demographic data.

Multiple files can be selected from multiple directories. Acceptable file formats include .gif, .jpg, .jpeg, .png, .doc, .docx, .xls, .xlsx, .pdf, .txt.

Demographic Change Request

Pending

Save   Back   Print

Information can be printed by selecting Print.

User Instructions

All changes to name require a copy of social security card with same name. Please attach copy of social security card or bring your card by the Payroll department.

First Name	B	Middle Name	
Last Name	ANDY	Birthday	
Email	ANDY_B@HARRISSCHOOL.ORG	Gender	Female
Address 1	P. O. BOX	Address 2	42 STREET
City	BAY SAINT LOU	State MS	Zip Code 39520-1032
Home Phone		Cell Phone	

Attachments

Select files...

Welcome Scan.jpg

Choose File to Upload

Libraries ▶ Documents ▶

Organize ▾   New folder

Favorites
  Desktop
  Downloads
  Recent Places
  Photo shoot

Libraries
  Documents

Documents library
Includes: 2 locations

Name
  20120110-NextGen W-2 Web
  AIMLogger
  Bluetooth Exchange Folder
  bugsheets

NOTE: A change to the email address on the demographic screen changes the email address in the payroll system which may be used by the school district when corresponding with the employee. It does not change the email address for the ESS notifications which was entered when the employee registered for ESS.

Employee Self Service – Tax Withholdings

Tax Withholding under the sub menu Payroll Changes will include your State Withholding and W-4 Withholding Forms.
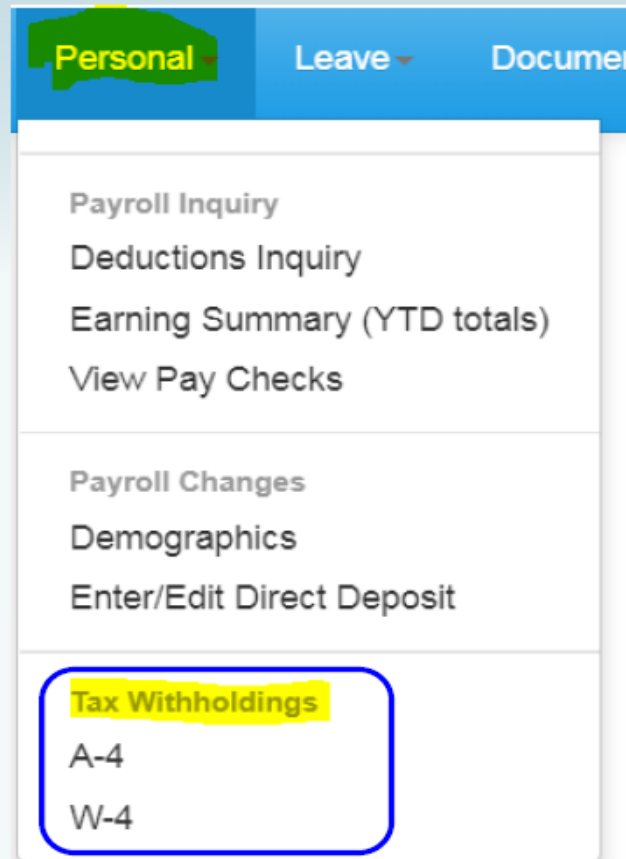
Employee Self Service – W4

Changes can be made to the employee's W4 with an electronic signature.

Current Withholding Allowances

Type	Tax Status	Allowances	Addl. Amt	Exempt
Federal	Single	0	100.00	☐
State	Single	0	0.00	☐

[Save] [Back]

Employee's current Federal and State withholding information is displayed.

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Witholding Allowance Certificate

▶Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

www.irs.gov/pub/irs-pdf/fw4.pdf

IRS.GOV W4 WorkSheet Application

OMB No. 1545-0074

2016

IRS instructions and worksheet are accessible from W4 form.

1. Your first name and middle initial — **DEEDEE S**   Last Name — **COOKER**   2. Your social security number — XXX-XX-

Home address(number and street or rural route) Address   3   Single

Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.

City or town, state, and ZIP code   **WEST BLOCTON, AL 35184**

If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ ☐

If requesting a change for W4, the employee must enter **ALL** information on the W4 form, not just the change.

5. Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)   5   0

6. Additional amount, if any, you want withheld from each paycheck   6 $ 100.00

7. I claim exemption from withholding for 2016, and I certify that I meet both of the following conditions for exemption.
- Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and
- This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.

If you meet both conditions, write "Exempt" here   7

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(this form is not valid unless you sign it.)DEEDEE S COOKER ▶

Date(m/d/yyyy) ▶ 6/7/2016

Electronic signature and date must be exactly as displayed – no extra spaces, dashes or periods.

Employer Name/Address
... County Board of Education

Office Code(optional)

Employer FEIN

Current Withholding Allowances

Type	Tax Status	Allowances	Addl. Amt	Exempt
Federal	Single	1	0.00	☐
State	Single	1	0.00	☐

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Certificate

▶ Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.
▶ Give Form W-4 to your employer.
▶ Your withholding is subject to review by the IRS.

OMB No. 1545-0074

2022

**Step 1:
Enter
Personal
Information**

(a) First name and middle initial	Last name	(b) Social Security Number
EVELYN P	BUCH	

Address

City or town, state, and ZIP code
HOMEWOOD, AL   35209

▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.

(c)
🔘 Single or Married filing separately
⚪ Married filing jointly (or Qualifying widow(er))
⚪ Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy.

Step 2: Multiple Jobs or Spouse Works

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3–4); **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding;

or

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld ▶ ☐

TIP: To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependents	If your income will be $200,000 or less ($400,000 or less if married filing jointly):	
	Multiply the number of qualifying children under age 17 by $2,000	0.00
	Multiply the number of other dependents by $500	0.00
	3. Add the amounts above and enter the total here	0.00
Step 4 (optional): Other Adjustments	**4 (a) Other income (not from jobs).** If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income.	0.00
	4 (b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here.	0.00
	4 (c) Extra withholding. Enter any additional tax you want withheld each pay period.	0.00
	☐ **I certify that I meet all the conditions to claim exempt from Federal Withhold.**	
Step 5: Sign Here	Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.	
	Employee's signature (This form is not valid unless you sign it.) EVELYN P BUCH	Date 5/10/2022

Employers Only	Employer's name and address	First date of employment	Employer identification number (EIN)

Employee Self Service – A4 (Alabama)

Changes can be made to the employee's A4 with an electronic signature.

Current State of Alabama Employee's Withholding Allowances

Withholding Status	Exemptions	Dependents	Addl. Amt	Exempt
Single	1	0	0.00	☐

Employee's current State withholding information is displayed.

User Instructions

All employees need to print a copy of new A4 for their records. Please see open task or completed task for the a copy of your new A4.

A4 Instructions

Employee can view additional instructions for the A4 by clicking the *A4 Instructions* button.

[Save] [Back]

FORM
A-4 REV. 3/2014

ALABAMA DEPARTMENT OF REVENUE
Employee's Withholding Exemption Certificate

EMPLOYEE'S FULL NAME

SOCIAL SECURITY NO. XXX-XX-

HOME ADDRESS   .62   ROAD   CITY   MOUNDVILLE   STATE AL   ZIP 35474

SIGNATURE   DATE
(5/5/2016)

Electronic signature and date must be exactly as displayed – no extra spaces, dashes or periods.

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

HOW TO CLAIM YOUR WITHHOLDING EXEMPTIONS

1. If you claim no personal exemption for yourself, write the figure "0", sign and date Form A-4 and file it with your employer. | 0 |

2. If you are SINGLE or MARRIED FILING SEPARATELY a $1,500 personal exemption is allowed. Write the letter "S" if claiming the SINGLE exemption or "MS" if claiming the MARRIED FILING SEPARATELY exemption.
(Choose S or MS)

3. If you are MARRIED or SINGLE CLAIMING HEAD OF FAMILY, a $3000 personal exemption is allowed. Write the letter "M" if you are claiming an exemption for both yourself and your spouse or "H" if you are single with qualifying dependents and are claiming HEAD OF FAMILY exemption.
(Choose M or H)

If requesting a change for A4, the employee must enter ALL information on the A4 form, not just the change.

4. Number of dependents (other than spouse) that you will provide more than one-half of the support for during the year. See instructions for dependent qualifications. | 0 |

5. Additional amount, if any, you want deducted each pay period. | 0 |

6. This line to be completed by your employer: Total exemptions (example: employee claims "M" on line 3 and "2" on line 4. Employer should use column M-2 (married with 2 dependents) in the withholding tables). | S-0 |

EMPLOYER NAME   FEIN   EMPLOYER STATE ID
Board of Education

Employee Self Service – Leave

Leave Menu allows the employee to see their leave history and leave balances.
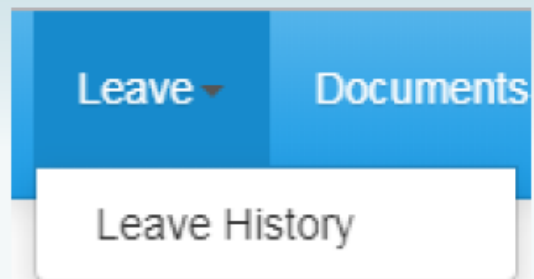
Employee Self Service – Leave History

Employee can view and print their detail leave history for a specific date range. Leave adjustment are displayed with the notes that related to the leave adjustment.

Leave History

Back | Print

Start Date
1/1/2010

End Date
1/31/2019

Date	Hrs/Days	Description	Note	Used
01/14/2016	D	District Title II		1.00
02/23/2016	D	SICK		1.00
03/25/2016	D	SICK		1.00
04/01/2016	D	SICK		1.00
04/15/2016	D	SICK		0.50
04/27/2016	D	PROFESSIONAL		1.00
04/28/2016	D	District Title II		0.50
05/06/2016	D	SICK	to S.Young/Cat.Leave	-1.00

Employee Self Service – View Pay Checks

Employee can view and print check/statement summary for a specific check date range. The employee can view check detail by clicking on a particular check.

My Checks

Start Date 1/1/2015

End Date 6/4/2016   [Search]

[Back] [Print]

Select date range and click Search to list pay records. Select check number from list to view pay record.

Date	Number	Date	Gross	Net	Pay Adj.-Sub Info
05/31/2016	133504 - (Check)	05/31/2016	$2,248.58	$1,190.99	
04/29/2016	133350 - (Check)	04/29/2016	$2,288.58	$1,217.66	
03/31/2016	133174 - (Check)	03/31/2016	$2,258.58	$1,197.66	
02/29/2016	133011 - (Check)	02/29/2016	$2,298.58	$1,224.23	
01/31/2016	132855 - (Check)	01/31/2016	$2,328.58	$1,244.23	
12/18/2015	132689 - (Check)	12/18/2015	$2,298.58	$1,223.44	
11/20/2015	132524 - (Check)	11/20/2015	$2,308.58	$1,230.10	
10/30/2015	132369 - (Check)	10/30/2015	$2,448.58	$1,323.13	
09/30/2015	132208 - (Check)	09/30/2015	$2,278.58	$1,210.20	
08/31/2015	132074 - (Check)	08/31/2015	$2,468.58	$1,336.35	
07/31/2015	131943 - (Check)	07/31/2015	$2,458.58	$1,329.69	
06/30/2015	131756 - (Check)	06/30/2015	$2,308.58	$1,230.10	

Employee Self Service-Earnings Summary (W2)

The employee can view and print their W2 for the selected year.

Employee Self Service - Electronic Form Agreement

Employee can change their choice for tax form delivery by selecting the option and save. Districts can also require that the Agreement be signed by all employees on initial login to ESS. This option may not be used by all districts.

Electronic Form Agreement - Please select one of the following for form delivery.

Harris school system is please to offer electronic delivery of all your forms beginning January, 2018. Your W2, and Pay Forms will be available for viewing and downloading in PDF format through your Employee Self Service account. In order to receive your forms electronically instead of paper copy, you need to give your consent before December 10, 2017. Your electronic W2 forms will be available for viewing by January, 2018. For more information on electronic consent, see Company Documents – Electronic Form Consent.

Example Text Only

● I consent to receive all my tax forms (W2, 1095, Alabama Truth in Salary) electronically each year. I understand I will NOT receive any paper copies of forms.

○ I want to receive paper forms for all my tax forms (W2, 1095, Alabama Truth in Salary).

Save

Helpful Tips and Tools In The Software

Internal Payroll Audits/Checks and Balances

- Monitor Last Employee Number Created before each payroll
- GL Distribution Report
  - by GL Component
- Salary & Benefits by GL Report
  - by Payroll Run Id
  - include Employee & GL Detail, and Gross
  - enter Matching Benefits in Report Columns
- Prior Period Comparison Report
  - export to Excel to explain the for variances in Gross, Fringe Benefits and Deductions
- Payroll Register
  - include Totals Grouped by GL Component – SFund
  - include Matching Ins Report Type – All
- Post Payroll to GL – Report Only – check for errors
- Change Terminated Employees to a Designated "9999" cost center number
- "Use End Pay Dates" field on Job Pay Record for Terminations

Check Last Employee Number Used Monthly "PR Parameter Maintenance I"

Check Employee Maintenance Audit Trail Monthly for all Employee Numbers to compare with Prior Period Comparison and Last Employee Number Used to Protect your system from Ghost Employees being Created

RUN DATE: MCAI PAYROLL SYSTEM   PREMAT

01/29/2012

RUN TIME: EMPLOYEE MAINTENANCE AUDIT REPORT

07:45: PM   Page 1 of 1

Γ CITY BOARD OF EDUCATION

BEGINNING   01/01/2012   END   01/31/2012

EMPLOYEE: 2728 CHURCH , ERIC   SOC.SEC.NUM: XXX-XX-XXXX   PERSON ID: 850

DATE	TIME	ACTION	TABLE & RECORD	USER ID	FIELD	OLD VALUE	NEW VALUE	TRANS
01/19/2012	8:40:27 AM	Change	PREMPJOB- Job:1	payroll	Pay Period Salary	0.00	1,190.03	PR/EMNT

EMPLOYEE: 2334 BURNEM , EARNEM   SOC.SEC.NUM: XXX-XX-XXXX   PERSON ID: 33

DATE	TIME	ACTION	TABLE & RECORD	USER ID	FIELD	OLD VALUE	NEW VALUE	TRANS
01/23/2012	1:45:17 PM	Change	PREMPJOB- Job:1	payroll	Pay Period Salary	4,118.83	3,887.56	PR/EMNT

EMPLOYEE: 2737 BRYAN , LUKE   SOC.SEC.NUM: XXX-XX-XXXX   PERSON ID: 859

DATE	TIME	ACTION	TABLE & RECORD	USER ID	FIELD	OLD VALUE	NEW VALUE	TRANS
01/24/2012	2:19:34 PM	Change	PREMPJOB- Job:1	payroll	Pay Period Salary	0.00	3,124.69	PR/EMNT

*** END OF REPORT ***

GL Distribution Report verifies the employees posting to each cost center and funding source as well as each component of the GL Account Number.

This Report is very helpful in finding coding errors prior to posting your payroll. Selecting the SFund GL Component and the CCTR sorting option gives you the employees by cost center and funding source. Select any combination to help you verify your coding is correct for the current year's budget.

RUN DATE:	07/28/2018	MCAI PAYROLL SYSTEM	Page 1 of 51
RUN TIME:	06:26PM	DISTRIBUTION REPORT (EMPLOYEE)	PRGLD1
		CITY BOARD OF EDUCATION	
		PAYROLL RUN ID: JULY2018 CHECK DATE: 2018-07-31 MONTHLY	

	GROSS AMT	EX	EMPLOYEE NAME	EMPLOYEE#

CCTR 0010 ELEMENTARY SCHOOL
SFund 1110 FOUNDATION PROGRAM

Account	GROSS AMT	EMPLOYEE NAME	EMPLOYEE#
11-5-1100-010-0010-1110-0-1100-0000	4,575.17	Last Name, First Name	2140
	4,138.83	Last Name, First Name	2855
	4,724.08	Last Name, First Name	1389
	5,201.42	Last Name, First Name	2966
	4,996.17	Last Name, First Name	1675
	4,996.17	Last Name, First Name	3235
G/L TOTAL ======>	28,631.84		
11-5-1100-010-0010-1110-0-1200-0000	4,996.17	Last Name, First Name	1024
	3,804.58	Last Name, First Name	3250
	4,165.54	Last Name, First Name	2490
	3,747.86	Last Name, First Name	2954
	3,406.59	Last Name, First Name	2668
	4,512.67	Last Name, First Name	2215
	4,450.17	Last Name, First Name	2386
	4,450.17	Last Name, First Name	2667
	4,138.83	Last Name, First Name	3116
	5,237.67	Last Name, First Name	2494
	4,628.50	Last Name, First Name	1131
	4,760.42	Last Name, First Name	1442
	5,148.33	Last Name, First Name	1189
	4,221.25	Last Name, First Name	3241
	5,148.33	Last Name, First Name	2634
	4,996.17	Last Name, First Name	2383
	4,398.28	Last Name, First Name	2741
	4,760.42	Last Name, First Name	2028
	5,112.08	Last Name, First Name	2990
	4,182.28	Last Name, First Name	2801

You can verify the substitute's and supplement's posting to each cost center and funding source as well as each component of the GL Account Number.

This report is very helpful in finding substitute and supplement coding errors prior to posting your payroll. Select any combination to help you verify your coding is correct for the current year's budget.

```
RUN DATE:     07/28/2018                          MCAI PAYROLL SYSTEM                          Page 15 of 22
RUN TIME:     06:37PM                      DISTRIBUTION REPORT (SFund/EMPLOYEE)                PRGLD1
                                              CITY BOARD OF EDUCATION
                                PAYROLL RUN ID: JULY2018    CHECK DATE: 2018-07-31  MONTHLY


SFund                                                 GROSS AMT    EX    EMPLOYEE NAME              EMPLOYEE#

Object  180 SUBSTITUTE
6001                      11-5-1100-180-0020-6001-0-1810-0000    210.00         SUBSTITUTE, FEDERAL FUNDS        1065
                                                                 140.00         SUBSTITUTE2, FEDERAL FUNDS       1559

                         G/L TOTAL ======>          350.00
6001                      11-5-6210-180-8600-6001-0-8620-0000    630.00         Last Name, First Name            3219

                         G/L TOTAL ======>          630.00

         Object 191 TOTAL                           980.00
Object  192 STIPENDS
6001                      11-5-2215-192-0020-6001-0-4300-6918     75.00         Last Name, First Name            1730
                                                                  75.00         Last Name, First Name            1140
                                                                  75.00         Last Name, First Name            1341
                                                                  75.00         Last Name, First Name            1437
                                                                  75.00         Last Name, First Name            2659

                         G/L TOTAL ======>          375.00

         Object 192 TOTAL                           375.00
```

Salary & Benefit by GL Report is a very helpful in finding retirees, substitutes and supplement coding errors prior to posting your payroll. Selecting these object code sorting values helps to verify that Matching Ins and Retirement have been sheltered from the appropriate Job Pay Records.

A quick scan of these Columns reveal that Matching Ins and Retirement have <u>NOT</u> been sheltered from the appropriate Job Pay Records in the following example. This report can be used as a quick scan of any Matching Benefit.

| RUN TIME: | 03:09: PM | | Salary & Benefits by GL Report (v3.21) | | | | | PRSBGL |

CITY BOARD OF EDUCATION
PAYROLL RUN ID: MAR2020

	GROSS AMT	EMPLOYEE TRet	EMPLOYEE tret2	EMPLOYER Peehip-Bd	EMPLOYEE DentBd	EMPLOYER LIFEINS	TOTAL
CONTRACT SUBSTITUTE 089							
11-5-1100-089-0040-6001-0-1602-0000							
1251 LAST NAME, FIRST NAME		2,500.00					2,500.00
Account Total:	2,500.00						2,500.00
11-5-1100-089-8100-6001-0-2900-3020							
2868 LAST NAME, FIRST NAME		3,325.00					3,325.00
Account Total:	3,325.00						3,325.00
11-5-2180-089-8210-6001-0-2900-3020							
2933 LAST NAME, FIRST NAME		3,206.25					3,206.25
Account Total:	3,206.25						3,206.25
11-5-2190-089-0010-6001-0-1200-0000							
1157 LAST NAME, FIRST NAME		1,342.50					1,342.50
3660 LAST NAME, FIRST NAME		1,612.50					1,612.50
1504 LAST NAME, FIRST NAME		1,792.50					1,792.50
3663 LAST NAME, FIRST NAME		1,425.00					1,425.00
Account Total:	6,172.50						6,172.50
11-5-2190-089-0020-6001-0-1100-0000							
3665 LAST NAME, FIRST NAME		2,235.00					2,235.00
Account Total:	2,235.00						2,235.00
11-5-2190-089-0020-6001-0-1200-0000							
1448 LAST NAME, FIRST NAME		862.50					862.50
2560 LAST NAME, FIRST NAME		1,020.00					1,020.00
Account Total:	1,882.50						1,882.50
11-5-2190-089-0035-6001-0-1500-0000							
3265 LAST NAME, FIRST NAME		2,940.00					2,940.00
1570 LAST NAME, FIRST NAME		1,807.50					1,807.50
3772 LAST NAME, FIRST NAME		2,190.00					2,190.00
1727 LAST NAME, FIRST NAME		2,190.00					2,190.00
Account Total:	9,127.50						9,127.50

Prior Period Comparison Report for changes in Gross Pay by Employee Name and Employee Type

The Prior Period Comparison Report recognizes the changes from a previous payroll period. The report can be Exported to Excel where your Payroll Officer can add an Explanation Column to document the reason for the variances.

The following report was run for changes only in Gross Salary.

PRIOR PERIOD: 2/01/2020 THRU 2/28/2020

SELECTED (CURRENT) PAYROLL RUN ID: MAR2020   DATED: 3/31/2020 REPORT SORTED BY EMPLOYEE NAME, CHANGES ONLY (DIFFERENCE NOT ZERO) SHOWN

EMPLOYEE NAME	EMP#	SSN	JOB#	PRIOR AMOUNT	CURRENT AMOUNT	DIFF FROM PRIOR PERIOD	EXPLANTIONS>$200
BURN'EM, EARN'EM	2334	xxx-xx-xxxx	1	4,118.83	3,887.56	-231.27	No leave - DCK 1 day
BRYAN, LUKE	2737	xxx-xx-xxxx	1	.00	3,124.69	3,124.69	New Teacher
CHURCH, ERIC	2728	xxx-xx-xxxx	1	.00	1,190.03	1,190.03	New Bus Driver
COMBS, LUKE	2232	xxx-xx-xxxx	20	58.32	.00	-58.32	
GREEN, RILEY	2350	xxx-xx-xxxx	35	9.38	.00	-9.38	
KEITH, TOBY	2005	xxx-xx-xxxx	10	12.96	.00	-12.96	
MORRIS, MAREN	2109	xxx-xx-xxxx	30	100.00	.00	-100.00	
SHELTON, BLAKE	2671	xxx-xx-xxxx	21	-67.83	.00	67.83	
EMPLOYEE GROSS PAY TOTALS======>				4,231.66	8,202.28	3,970.62	

* * * END OF REPORT * * *

Prior Period Comparison Report for changes in Fringe Benefit Data

This Prior Period Comparison Report Exported to Excel displays the variances to the Fringe Benefit Amounts .

FRINGE AMOUNT PRIOR PERIOD COMPARISON REPORT

PRIOR PERIOD: 2/01/2020 THRU 2/28/2020- EMPLOYEE FRINGE AMOUNTS SHOWN

SELECTED (CURRENT) PAYROLL RUN ID: MAR2020   DATED: 3/31/2020 REPORT SORTED BY EMPLOYEE NAME

EMPLOYEE NAME	EMP#	SSN	JOB#	PRIOR AMOUNT	CURRENT AMOUNT	DIFF FROM PRIOR PERIOD	EXPLANTIONS > 0.50
BURN'EM, EARN'EM	2334	xxx-xx-xxxx	1	.98	3.91	2.93	**Diff age bracket**
BRYAN, LUKE	2737	xxx-xx-xxxx	1	.00	.48	0.48	
CHURCH, ERIC	2728	xxx-xx-xxxx	1	.00	.16	0.16	
COMBS, LUKE	2232	xxx-xx-xxxx	1	.61	.64	0.04	
GREEN, RILEY	2350	xxx-xx-xxxx	1	.60	.69	0.09	
KEITH, TOBY	2005	xxx-xx-xxxx	1	3.97	4.23	0.26	
MORRIS, MAREN	2109	xxx-xx-xxxx	1	3.45	3.51	0.06	
SHELTON, BLAKE	2671	xxx-xx-xxxx	1	2.51	4.14	1.63	**Promoted to Principal**
EMPLOYEE GROSS PAY TOTALS======>				12.12	17.76	5.65	

* * * END OF REPORT * * *

Prior Period Comparison Report for changes in Gross Pay & Deductions for the New Contract/Fiscal Year

Prior Period Comparison Report by Employee Type is very helpful for verifying increases/decreases in Gross Pay for extra duties, raises, supplements, stipends, etc.

MCAI PAYROLL SYSTEM

RUN TIME:
07:41: PM

EMPLOYEE GROSS PAY PRIOR PERIOD COMPARISON REPORT

HOMEWOOD CITY BOARD OF EDUCATION

PRIOR PERIOD: 06/01/2018 THRU 06/30/2018

SELECTED (CURRENT) PAYROLL RUN ID: JULY2018   DATED: 2018-7-31   REPORT SORTED BY EMPLOYEE NAME, CHANGES ONLY (DIFFERENCE NOT ZERO) SHOWN

EMPLOYEE NAME	EMP#	JOB#	ETYPE	PRIOR AMOUNT	CURRENT AMOUNT	DIFF FROM PRIOR PERIOD	PERCENT DIFF
LAST NAME, FIRST NAME	3469	1	AD	6,598.21	6,763.17	164.96	2.50007%
LAST NAME, FIRST NAME	1007	1	AF	7,994.22	8,194.08	199.86	2.50006%
LAST NAME, FIRST NAME	3112	1	AP	8,688.21	8,905.42	217.21	2.50005%
LAST NAME, FIRST NAME	2951	1	AP	8,028.78	8,229.50	200.72	2.50001%
LAST NAME, FIRST NAME	3470	1	AP	6,794.87	6,964.75	169.88	2.50012%
LAST NAME, FIRST NAME	1730	1	AP	6,875.36	7,047.25	171.89	2.50009%
LAST NAME, FIRST NAME	3368	1	AP	6,553.90	6,717.75	163.85	2.50004%
LAST NAME, FIRST NAME	3346	1	AP	7,057.80	7,234.25	176.45	2.50007%
LAST NAME, FIRST NAME	1445	1	ASFI	12,187.24	12,491.92	304.68	2.49999%
LAST NAME, FIRST NAME	1024	1	ASIN	12,269.10	12,575.83	306.73	2.50002%
LAST NAME, FIRST NAME	1025	1	PR	7,755.44	7,949.33	193.89	2.50005%
LAST NAME, FIRST NAME	2194	1	PR	10,344.80	10,603.42	258.62	2.50000%
LAST NAME, FIRST NAME	3250	2	PR	7,129.83	7,308.08	178.25	2.50006%
LAST NAME, FIRST NAME	2490	1	PR	4,027.23	4,127.92	100.69	2.50023%
LAST NAME, FIRST NAME	3238	1	PR	7,755.44	7,949.33	193.89	2.50005%
LAST NAME, FIRST NAME	1043	1	PR	7,994.22	8,194.08	-4,952.50	2.50006%
LAST NAME, FIRST NAME	3472	1	PR	7,907.31	8,105.00	-4,575.17	2.50009%
LAST NAME, FIRST NAME	3391	1	PR	8,748.94	8,967.67	-3,365.17	2.50007%
LAST NAME, FIRST NAME	1050	1	PR	8,210.00	8,415.25	-5,148.33	2.50000%
LAST NAME, FIRST NAME	2902	1	TC12	6,763.17	6,932.25	169.08	2.50000%
LAST NAME, FIRST NAME	2622	1	TC12	6,700.92	6,868.44	167.52	2.50000%
LAST NAME, FIRST NAME	2470	1	TC12	5,711.00	5,853.78	142.78	2.50000%
LAST NAME, FIRST NAME	2301	3	TC12	6,329.08	6,487.31	158.23	2.50000%
LAST NAME, FIRST NAME	1697	1	TC12	7,163.17	7,342.25	179.08	2.50000%
LAST NAME, FIRST NAME	1604	1	TC12	6,825.50	6,996.14	170.64	2.50000%
LAST NAME, FIRST NAME	1649	6	TC12	6,763.17	6,932.25	169.08	2.50000%
LAST NAME, FIRST NAME	1725	1	TC12	6,825.50	6,996.14	170.64	2.50000%
LAST NAME, FIRST NAME	2954	1	TC9	3,747.86	.00	-3,747.86	-100.00000
LAST NAME, FIRST NAME	3369	1	TC9	3,718.98	.00	-3,718.98	-100.00000
LAST NAME, FIRST NAME	1061	1	TC9	4,325.17	.00	-4,325.17	-100.00000

The Payroll Register is normally verified and signed by the CSFO before the payroll is processed. If the "Include Totals by SFund" option is selected, it is a very useful tool in checking GL coding.

The last page has summary totals by Source of Funds. It is easy to compare the figures from one month to the next and is also the total amount to transfer to the Payroll Clearing Fund.

M CAI PAYR OLL SYSTEM
PAYR OLL REGISTER
CITY BOARD OF EDUCATION
PAYROLL RUN ID: MAR 2020 - Regular
CHECK DATE: 03/31/2020 ALL PERIODS END OF MONTH SICK LEAVE MONTH: 7

SFund	gross	SS MATCH	MC MATCH	SUI MATCH	RET MATCH	WC MATCH	BOARD PAID	MAT INS	SFUND TOTAL
1110	1,561,635.09	91,039.93	21,291.53	0.00	191,429.91	0.00	0.00	261,691.83	2,127,088.29
1220	12,289.24	737.14	172.40	0.00	1,527.56	0.00	0.00	2,265.53	16,991.87
1221	4,033.99	249.18	58.28	0.00	501.43	0.00	0.00	306.04	5,148.92
1230	9,778.20	573.28	134.07	0.00	1,215.44	0.00	0.00	1,521.23	13,222.22
1252	30.00	1.86	0.44	0.00	0.00	0.00	0.00	0.00	32.30
1279	1,027.57	62.34	14.60	0.00	124.71	0.00	0.00	0.00	1,229.22
1310	2,665.82	160.69	37.59	0.00	325.15	0.00	0.00	166.01	3,355.26
1520	1,700.43	83.50	19.53	0.00	211.36	0.00	0.00	649.06	2,663.88
2901	1,666.68	101.14	23.66	0.00	207.16	0.00	0.00	0.00	1,998.64
3210	41,511.24	2,426.28	567.44	0.00	4,964.25	0.00	0.00	14,469.81	63,939.02
3220	463.24	22.75	5.32	0.00	57.58	0.00	0.00	176.82	725.71
4110	20,317.49	1,188.92	278.05	0.00	2,523.53	0.00	0.00	3,028.77	27,336.76
4130	1,111.29	68.10	15.93	0.00	138.13	0.00	0.00	84.31	1,417.76
5101	68,235.11	3,831.61	896.12	0.00	8,236.20	0.00	0.00	27,231.47	108,430.51
5315	20,259.70	1,225.74	286.66	0.00	2,227.89	0.00	0.00	2,615.91	26,615.90
5920	3,974.66	239.01	55.89	0.00	460.35	0.00	0.00	551.62	5,281.53
5991	4,229.30	228.78	53.49	0.00	504.59	0.00	0.00	672.35	5,688.51
6001	922,577.08	54,642.84	12,779.42	0.00	101,779.28	0.00	0.00	153,211.28	1,244,989.90
6921	9,057.74	490.74	114.77	0.00	1,125.88	0.00	0.00	2,482.59	13,271.72
TOTAL ===>	2,686,563.87	157,373.83	36,805.19	0.00	317,560.40	0.00	0.00	471,124.63	3,669,427.92

*** END OF REPORT ***

Pre-Post Payroll to GL, with REPORT ONLY – Do Not Post checked, is a very useful tool in preventing GL coding errors when performed prior to processing the ACH file and printing Checks.

The last page has the transfer totals by Source of Funds. Compare the figures below and ensure they match the totals from the Payroll Register above before transferring to the Payroll Clearing Fund.

MCAI PAYROLL SYSTEM
JOURNAL ENTRY REPORTING FROM POSTING
CITY BOARD OF EDUCATION
MAR 2020

TRANSACTION ID #   47321

	SRC CD	FY	DATE POSTED	FP	GENERAL REF.	DEBIT AMOUNT	CREDIT AMOUNT	COMMENT
38-1-0133-000-0000-1279-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	1,229.22	FUND 38 CD 3/2020
38-1-0133-000-0000-2901-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	1,998.64	FUND 38 CD 3/2020
38-1-0133-000-0000-1220-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	16,991.87	FUND 38 CD 3/2020
38-1-0133-000-0000-1252-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	32.30	FUND 38 CD 3/2020
38-1-0133-000-0000-1310-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	3,355.26	FUND 38 CD 3/2020
38-1-0133-000-0000-1221-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	5,148.92	FUND 38 CD 3/2020
38-1-0133-000-0000-6921-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	13,271.72	FUND 38 CD 3/2020
38-1-0133-000-0000-1520-0-0000-8911	P/R	2020	03/31/2020	6	TRANS 11	0.00	2,663.88	FUND 38 CD 3/2020
38-1-0111-000-0000-0000-0-0000-0000	P/R	2020	03/31/2020	6	TRANS 12	234,154.17	0.00	FUND 38 CD 3/2020
38-1-0133-000-0000-4110-0-0000-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	27,336.76	FUND 38 CD 3/2020
38-1-0133-000-0000-3210-0-0000-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	63,939.02	FUND 38 CD 3/2020
38-1-0133-000-0000-5315-0-0000-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	26,615.90	FUND 38 CD 3/2020
38-1-0133-000-0000-5991-0-0000-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	5,688.51	FUND 38 CD 3/2020
38-1-0133-000-0000-4130-0-0000-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	1,417.76	FUND 38 CD 3/2020
38-1-0133-000-0010-5101-0-8420-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	20,680.52	FUND 38 CD 3/2020
38-1-0133-000-0020-5101-0-8420-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	16,234.06	FUND 38 CD 3/2020
38-1-0133-000-0030-5101-0-8420-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	23,789.10	FUND 38 CD 3/2020
38-1-0133-000-0035-5101-0-8420-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	33,087.57	FUND 38 CD 3/2020
38-1-0133-000-0040-5101-0-8420-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	14,639.26	FUND 38 CD 3/2020
38-1-0133-000-0000-3220-0-0000-8912	P/R	2020	03/31/2020	6	TRANS 12	0.00	725.71	FUND 38 CD 3/2020
			FUND TOTALS			3,669,427.92	3,669,427.92	
			GRAND TOTALS			18,347,139.60	18,347,139.60	

*** END OF REPORT ***

Designating a "Terminated Employees" Cost Center # 9999 and placing in the Reporting and Check Location Fields can Help you Catch Overpayments BEFORE they occur.

Using the "Use Pay Dates / Use Pay End Dates" can also eliminate Overpayments BEFORE they occur.

Payroll Edits After Update & Posting

- Payroll Check Records By GL Acct , YTD Distribution Report, and/or Salary & Benefits by GL Report

  - choose Check Date Range

  - by Object and/or SFund (any combination needed)

  - check all Federal Funding Sources

- Salary Transfer / Check Distribution Transfer

  - choose Employee(s) in Maintenance and add GL Acct Number needed to Job GL Dist Record if missing before continuing to Salary Transfer

  - enter Employee Number and Posting Date

  - choose Check Record(s) to edit GL Distribution

  - enter negative amount(s) to reduce the incorrect GL Acct Number(s) and enter matching positive amount(s) to the correcting GL Acct Number(s)

- The General Ledger will be corrected and the Employee's Records and the Payroll Check Record Reports will match the General Ledger Amounts.

PAYROLL CHECK RECORDS BY GL ACCT – OBJECT/SFUNDS
Run monthly and at fiscal year end to check for Coding Errors

YTD DISTRIBUTION REPORT

Run monthly and at fiscal year end to check for Budget Overages

SALARY & BENEFITS BY GL ACCT –SFUNDS

Run monthly and at fiscal year end to find employees to correct with Salary Transfer

SALARY TRANSFER / CHECK DISTRIBUTION TRANSFER:
FIRST – GO INTO EMPLOYEE MAINTENANCE AND
ADD THE CORRECT G/L NUMBER TO THE JOB G/L DIST RECORD

SALARY TRANSFER – CHECK DISTRIBUTION TRANSFER:
After entering the Employee # and Posting Date, select the Check Record(s) to Correct

SALARY TRANSFER – CHECK DISTRIBUTION TRANSFER:

Select Change, the Incorrect Account Number, and enter Negative Adjustment Amount

SALARY TRANSFER MENU – CHECK DISTRIBUTION TRANSFER:

Add the Correct Account Number with a Positive Adjustment Amount

SALARY TRANSFER MENU – CHECK DISTRIBUTION TRANSFER: CORRECTS GL POSTING AND PAYROLL RECORDS

RUN DATE: 01/23/2012
RUN TIME: 2:06 pm
MCAI PAYROLL SYSTEM
SALARY TRANSFER DISTRIBUTION
BOARD OF EDUCATION
Page 1 o
PRSA

Before Image

NAME	NUMBER	CHECK/STATEMENT
MARY ELIZABETH (	2546	9009071

JOB_NO	Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	GROSS
50	12-5-9130-199-0030-4110-0-4800-0000	1,000.00
		1,000.00

JOB	DED_NO	DESCRIPTION	Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	EMP AMOUNT	BRD AMOUNT	WAGE AMOUNT
50	2	S SECURITY	12-5-9130-199-0030-4110-0-4800-0000	42.00	62.00	1,000.00
50	3	FED. TAX	12-5-9130-199-0030-4110-0-4800-0000	88.33	0.00	1,000.00
50	4	STATE TAX	12-5-9130-199-0030-4110-0-4800-0000	31.83	0.00	1,000.00
50	5	TARR CITY	12-5-9130-199-0030-4110-0-4800-0000	5.00	0.00	1,000.00
50	7	MEDICARE	12-5-9130-199-0030-4110-0-4800-0000	14.50	14.50	1,000.00
50	8	UNEMPLOYME	12-5-9130-199-0030-4110-0-4800-0000	0.00	7.80	0.00
50	120	COMPASS BK	12-5-9130-199-0030-4110-0-4800-0000	818.34	0.00	0.00

RUN DATE: 01/23/2012
RUN TIME: 02:06PM
MCAI PAYROLL SYSTEM
JOURNAL ENTRY REPORTING FROM POSTING
TARRANT CITY BOARD OF EDUCATION
SALARY TRANSFER
Page 1 of 4
PRPPGL

TRANSACTION ID # 9451

Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	SRC CD	FY	DATE POSTED	FP	GENERAL REF.	DEBIT AMOUNT	CREDIT AMOUNT	COMMENT
12-5-9130-199-0030-4110-0-4800-0000	PST	2012	01/23/2012	4	GROSS PAY	0.00	1,000.00	FUND TRANSFERS 1/23/2012 1:52:11 PM
12-5-9130-230-0030-4110-0-4800-0000	PST	2012	01/23/2012	4	MATCHING SS	0.00	62.00	FUND TRANSFERS 1/23/2012 1:52:11 PM
12-5-9130-240-0030-4110-0-4800-0000	PST	2012	01/23/2012	4	MATCHING MC	0.00	14.50	FUND TRANSFERS 1/23/2012 1:52:11 PM
12-5-9130-250-0030-4110-0-4800-0000	PST	2012	01/23/2012	4	MATCHING SUI	0.00	7.80	FUND TRANSFERS 1/23/2012 1:52:11 PM
					FUND TOTALS	0.00	1,084.30	

SALARY TRANSFER MENU – CHECK DISTRIBUTION TRANSFER: CORRECTS GL POSTING AND PAYROLL RECORDS

RUN DATE: 01/23/2012
RUN TIME: 2:06 pm

MCAI PAYROLL SYSTEM
SALARY TRANSFER DISTRIBUTION
CITY BOARD OF EDUCATION

Page 1 of 1
PRSALT

After Image

NAME	NUMBER	CHECK/STATEMENT
MARY ELIZABETH	2546	9009071

JOB_NO	Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	GROSS
50	11-5-9130-011-8100-1810-0-4600-0000	1,000.00
		1,000.00

JOB	DED_NO	DESCRIPTION	Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	EMP AMOUNT	BRD AMOUNT	WAGE AMOUNT
50	2	S SECURITY	11-5-9130-011-8100-1810-0-4600-0000	42.00	62.00	1,000.00
50	3	FED. TAX	11-5-9130-011-8100-1810-0-4600-0000	88.33	0.00	1,000.00
50	4	STATE TAX	11-5-9130-011-8100-1810-0-4600-0000	31.83	0.00	1,000.00
50	5	TARR CITY	11-5-9130-011-8100-1810-0-4600-0000	5.00	0.00	1,000.00
50	7	MEDICARE	11-5-9130-011-8100-1810-0-4600-0000	14.50	14.50	1,000.00
50	8	UNEMPLOYME	11-5-9130-011-8100-1810-0-4600-0000	0.00	7.80	0.00
50	120	COMPASS BK	11-5-9130-011-8100-1810-0-4600-0000	818.34	0.00	0.00

RUN DATE: 01/23/2012
RUN TIME: 02:06PM

MCAI PAYROLL SYSTEM
JOURNAL ENTRY REPORTING FROM POSTING
CITY BOARD OF EDUCATION
SALARY TRANSFER

Page 2 of
PRPP

TRANSACTION ID #   9451

Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	SRC CD	FY	DATE POSTED	FP	GENERAL REF.	DEBIT AMOUNT	CREDIT AMOUNT	COMMENT
11-5-9130-011-8100-1810-0-4600-0000	PST	2012	01/23/2012	4	GROSS PAY	1,000.00	0.00	FUND TRANSFERS 1/23/2012 1:52:11 PM
11-5-9130-230-8100-1810-0-4600-0000	PST	2012	01/23/2012	4	MATCHING SS	62.00	0.00	FUND TRANSFERS 1/23/2012 1:52:11 PM
11-5-9130-240-8100-1810-0-4600-0000	PST	2012	01/23/2012	4	MATCHING MC	14.50	0.00	FUND TRANSFERS 1/23/2012 1:52:11 PM
11-5-9130-250-8100-1810-0-4600-0000	PST	2012	01/23/2012	4	MATCHING SUI	7.80	0.00	FUND TRANSFERS 1/23/2012 1:52:11 PM
					FUND TOTALS	1,084.30	0.00	

SALARY TRANSFER / CHECK DISTRIBUTION TRANSFER:

CORRECTS GL POSTING AND PAYROLL RECORDS – DELETE INCORRECT G/L NUMBER IF FYTD IS 0.00, If NOT, ZERO OUT Curr. % & FTE

Maintenance of Effort Verification

- Review Special Education Program Codes –
  - Program Code Matches Grade Level Range

    2200 Kindergarten; 2300 Grades 1-6; 2400 Grades 7-12;

    2900 Other; & 4712 Preschool

  - Certified, Non-Certified, & Substitutes

- Review Career/Technical Education Codes –
  - State Funding Sources 1000-2999
  - Program Codes 3000-3999 & 1660-1679

    Can Meet by Total Expenditures or Per Capita Expenditures

    Being >= 1995 Expenditures

Salary & Benefit by GL Report is also very helpful in reviewing Special Education & Career Tech MOE coding requirements prior to posting your payroll by selecting these Function & Program Code sorting values. Verify your coding is correct for the current year's budget.

QUESTIONS?????

Disclaimer

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