

**SPECIAL PAYMENTS PAYROLL AUTHORIZATION**

ACTION CODE		EFFECTIVE DATE		AGENCY CODE <b>23.02.01</b>		AGENCY CONTACT & PHONE NUMBER <b>Debbie Adkins 240-895-4309</b>			
SOCIAL SECURITY NO. (Verified)			FIRST NAME (Legal name only)			MIDDLE Initial		LAST NAME (Legal name only)	
RATE OF PAY		H/D <b>H</b>	NPH <b>80</b>	PCT EMP <b>100</b>	CHK DIST/LOC _____	SUB-PGM _____	PROGRAM <b>000</b>	PSEUDO CODE _____	
FUND SOURCE FIRST	CODE <b>01 or 03</b>	PERCENT <b>100</b>	REVIEW CODE <b>4</b>		CLASS CODE <b>9508</b>	BIRTH DATE	SEX	ETHNIC ID	
SECOND				AGENCY CONTROL/BUDGET NUMBER				RESERVED (PIN)	
				FUND	FUNCTION	OBJECT	SUBFUND		
THIRD				ENTRY ON DUTY DATE		(IF EMPLOYEE HAS HAD PREVIOUS CONTRACTS THE ENTRY OF DUTY DATE SHOULD BE THE DATE OF THE ORIGINAL CONTRACT.)			

Department Head Approval: \_\_\_\_\_

Employee Job Title: \_\_\_\_\_

Employee ID Number: (CARS) \_\_\_\_\_

Budget Title: \_\_\_\_\_

Division/Dept: \_\_\_\_\_

Remarks:

Forms Required: I9  
W4  
Direct Deposit  
Substance Abuse  
Drug Testing Policy  
Software Code  
Computer Usage  
Questionnaire  
MD New Hire

I CERTIFY THAT SUFFICIENT FUNDS ARE IDENTIFIED AND AVAILABLE IN THE AGENCY APPROPRIATION FOR CONTRACTUAL EMPLOYMENT TO SUPPORT THIS EXPENDITURE, THAT THE APPROPRIATE CONTROL AGENCY REVIEW STATUS HAS BEEN INDICATED AND THAT APPROVAL HAS OBTAINED BY WAY OF THE 312 PROCESS, IF REQUIRED.

\_\_\_\_\_  
SIGNATURE-FISCAL OFFICER (Personnel)

\_\_\_\_\_  
SIGNATURE-APPOINTING AUTHORITY  
**Michelle L. Forinash**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME-APPOINTING AUTHORITY

ACTION CODE (01-NEW HIRE, 02-TRANSFER, 03-CHANGE, 04-TERMINATE)

For new hires submission of a W4 (Form MW507) is required. The new W4 Form must indicate Payroll Type CT

REVIEW CODE (REASONS EXEMPT FROM PRE-EMPLOYMENT CONTROL AGENCY REVIEW)

01-STUDENT (FICA EXEMPT)  
06-COLLEGE FACULTY

04-DIRECT EMERGENCY SERVICES  
14-INCENTIVE AWARDS

**ETHNIC ID**

- 01-WHITE (NOT OF HISPANIC ORIGIN): INCLUDES PERSONS HAVING ORIGINS IN ANY OF THE PEOPLES OF EUROPE, NORTH AMERICA OR THE MIDDLE EAST
- 02-BLACK (NOT OF HISPANIC ORIGIN): INCLUDES PERSONS HAVING ORIGIN IN ANY OF THE BLACK RACIAL GROUPS OF AFRICA
- 03-ASIAN OR PACIFIC ISLANDERS: INCLUDES PERSONS HAVING ORIGINS IN ANY OF THE PEOPLES OF THE FAR EAST, SOUTHEAST ASIA, THE INDIAN SUBCONTINENT, OR THE PACIFIC ISLANDS. THIS AREA INCLUDES, FOR EXAMPLE, CHINA, KOREA, THE PHILIPPINE ISLANDS, AND SAMOA.
- 04-AMERICAN INDIAN OR ALASKAN NATIVE: INCLUDES PERSONS HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF NORTH AMERICA, AND WHO MAINTAIN CULTURAL IDENTIFICATION THROUGH TRIBAL AFFILIATION
- 05-HISPANIC: INCLUDES PERSONS OF MEXICAN, PUERTO RICAN, CUBAN, CENTRAL OR SOUTH AMERICAN, OR OTHER SPANISH CULTURE OF ORIGIN.