Oklahoma City Public Schools

District Employee Service Payment Request Form Instructions

This form must be downloaded prior to completing.

Complete this form when paying District Employees for Services Outside of Employee Contract.

Section I: Complete boxes 1 -7

Special instructions:

box 6a*: Enter beginning and ending date in **HH:MM format**.

box 6b**: Enter number of hours and minutes, (if pay is not based on

hours and the base pay & benefits remain a fixed amount

to work the event, enter 1 in this box).

Section II:

1) Enter Base Pay Amount for this employee / event in the box.

Lines a, b, c, & d will auto-populate based on previous entries.

Line a: Benefits Costs & TRS Grant matching costs will calculate at 38%.

Line b: Total Base Pay Amount (+) Benefit Costs.

Line c: Duplicate the number keyed in Section I, box 6b.

Line d: Calculate the total amount payable to District Employee.

<u>Section III:</u> Obtain electronic signature. If form is not signed electronically, insert printed name, date, and approval signature.

Attach completed form & any backup to the Activity Fund Purchase Requisition (PRAF).

OKLAHOMA CITY PUBLIC SCHOOLS

District Employee Service Payment Request

Section I: General Information		
(1) Employee Name	(2) Employee Number	
(3) Site Name	(4) Site Number	
(5) Description of Services Performed		
(6a*) Beginning & Ending Time (6b**)Total Time	(7) Activity	

Section II: Financial Information		
1) Base Pay Amount (determined by site; based on service performed)		
Line a - Benefit Costs & TRS Grant Matching Costs =	(Line a)	
Line b - Base Pay Amount + 38% =	(Line b)	
Line c - Number of Hours Worked =	(Line c)	
Line d - Total Amount Payable to Vendor #301591 =	(Line d)	
Section III: Signature		
(2) Principal Approval Sign (Insert eSignature above)		

Rev. 5.2020