

**UNIVERSITY OF WISCONSIN-STOUT  
LUMP SUM PAYMENT AUTHORIZATION FORM**

**THIS FORM SHOULD BE USED FOR FULL-TIME STAFF WHO ARE RECEIVING AN OVERLOAD PAYMENT AND FOR PART-TIME STAFF WHO ARE BEING PAID \$500 OR LESS. IF THE PAYMENT TO PART-TIME STAFF EXCEEDS \$500, YOU NEED TO COMPLETE EMPLOYMENT FORMS ES1 AND ES5.**

EMPLOYEE'S NAME: \_\_\_\_\_ SS#: \_\_\_\_\_ DEPT: \_\_\_\_\_

**PLEASE COMPLETE IF PAYMENT IS FROM 102 FUNDS:**

SOURCE OF FUNDS: \_\_\_\_\_ PROVOST FUNDING \_\_\_\_\_ GRANT BUYBACK \_\_\_\_\_ RESERVE \_\_\_\_\_ SALARY TURNOVER MONEY  
OTHER: \_\_\_\_\_ (please be specific)

**IF SALARY TURNOVER \$:** USE OF FUNDS: \_\_\_\_\_ FILL VACANCY \_\_\_\_\_ SICK LV REPLACEMENT \_\_\_\_\_ OTHER \_\_\_\_\_

DESCRIBE WORK TO BE DONE: \_\_\_\_\_ Project \_\_\_\_\_ Training/  
Workshop \_\_\_\_\_ Teaching \_\_\_\_\_ # credits Other \_\_\_\_\_  
Course# \_\_\_\_\_ please describe

DATE(S) OF SERVICES: \_\_\_\_\_ ACCOUNT(S) TO BE PAID FROM: \_\_\_\_\_

IF EMPLOYEE IS CURRENTLY PAID FROM A FEDERAL GRANT (S), GIVE ACCOUNT CODE(S): \_\_\_\_\_

IS EMPLOYEE CURRENTLY: \_\_\_\_\_ FULL-TIME \_\_\_\_\_ PART-TIME

**LUMP SUM AMOUNT TO BE PAID: \$ \_\_\_\_\_ (Fringe will also be charged to non-102 accounts)**

**Payment is: \_\_\_\_\_ Project Based\* \_\_\_\_\_ Time Based\* \*See back for explanation**

**Payment will be made as a lump sum payment at completion of work/project.**

\*\*Note: Payment will be made on the payroll following receipt of the form at the payroll office and will be made based on the end date given in the "Date(s) of Services".

**APPROVAL OF PAYMENT**

EMPLOYEE (agreeing to perform work) _____ Date _____	SUPERVISOR (allowing employee to perform work) _____ Date _____
ACCOUNT ADM (\$ available for payment) _____ Date _____	DEAN/DIRECTOR OF EMPLOYEE (for info/approval) _____ Date _____
PAYROLL (compliance w/\$12,000 overload cap) _____ Date _____	_____ Date _____
GRANTS ACCOUNTANT (\$ in grant for payment) _____ Date _____	PROVOST/DIVISION ADM (for info/approval) _____ Date _____
EMPLOYEE'S SIGNATURE (indicating work is complete) _____ Date _____	SUPERVISOR OF PROJECT (verifying complete of project) _____ Date _____

**IT IS THE SUPERVISOR'S RESPONSIBILITY TO ENSURE COMPLETION OF THE WORK. IF PAYMENT IS TO BE SUSPENDED OR STOPPED DUE TO NON-COMPLETION YOU MUST NOTIFY THE PAYROLL OFFICE AT x2223.**

## **INSTRUCTIONS FOR PROCESSING PAYMENTS**

Recurring needs for a staff member to assume special institutional responsibilities should be handled through some other method other than lump sum payment. (Examples: adjustment to existing responsibilities to allow release time; a temporary adjustment to base salary; conversion to an annual appointment.)

### **ALL PAYMENTS ARE TO BE APPROVED BEFORE THE WORK BEGINS.**

The form should be routed for signature as it appears on the reverse side of this form. The form needs to reach payroll by the 15<sup>th</sup> of the month in order to ensure payment on the next month's payroll check.

DEFINITIONS:       \*PROJECT BASED: A certain dollar amount to complete a project – no time restriction.  
                          \*TIME BASED: Work completed within a specified time period.

### **RESTRICTIONS:**

- 1)       Overload payments are to be used only when the work assignment is “unusual, short-term, and non-recurring” according to ACPS-4, Item 6.a..
- 2)       Overloads can only be paid to those employees who are working 100% (full-time status).
- 3)       An employee cannot receive an overload payment from the same account to which he is normally payrolled if the account is a grant or contract.
- 4)       Anyone payrolled to a federal grant account, in part or in total, cannot receive an overload from another federal grant. However, the employee could receive an overload payment from another funding source if such consulting arrangements are specifically provided for in the agreement or approved in writing by the sponsoring agency. (OMB Circular 21 and Chapter 5 Administrative Requirements-Discretionary Grants Administration Manual.)
- 5)       No employee can receive more than \$12,000 per calendar year from a single source. UW-Stout, acting in its capacity as a fiscal agent, represents a single source. (Wisconsin Statutes Section 19.45 (9)(m).)

### **QUESTIONS:**

Please contact Monica Winter, Payroll Specialist, at extension 2223, or Wayne Argo, Director of Human Resources, at extension 2312.