

UNIVERSITY OF SOUTHERN CALIFORNIA University Payroll Services – UGB 212, MC 8016 Payroll Overpayment Notification Form

Employee Name:		Employee ID:				
Cost Center Hi (KSOM Only, C	erarchy Level 5 – Nar CCH Level 7)	ne and ID #:				
			employee was ove yment Notificatio			
Pay Cycle:			[]ODCR			
Employee was paid: (Gross dollars)			Total Gross O/P			
Pay Component	Program Project Grant or Gift (PPGG)/ Cost Center ID	Amount Paid \$	Pay Component	Should've Been Paid \$	Overpayment \$ Amount	
Total:						
Explanation (I	Reason):					
Progra "Shoul 2. Payroll Contac 3. Create	printout of payslip form Project Grant or 0 d've Been Paid" coluit Services will calculut with a completed 6 a "pdf" of this comp	Gift (PPGG)/ umns above a ate the Net A 'Overpaymer	Cost Center are li and balanced to p amount of the Ove nt Worksheet"	isted under the "A payslip. erpayment and no	mount Paid" and tify the Department	
Department Contact Signature			Email Address			

Date

Print Name