

**CASUAL and OVERLOAD PAYMENT FORM
(TAPS)**

PAYEE NAME (LAST, FIRST):

Check Payroll Number (Choose Only One)

F2 (Casual Hire)

F4 (Graduate Assistant -Overload)

F5 (Faculty- Overload)

Department Warrant Distribution Code:

Account Code(s) to be Charged:

*if multiple account codes will be charged, please place amount/percentage next to account code

HOURLY: _____ (how many hours worked in this pay period)

Month: _____ Pay Period: _____

*use drop down box to select Month/Pay Period

GROSS: _____ (provide dollar amount)

Month: _____ Pay Period: _____

*use drop down box to select Month/Pay Period

Signature of Certifying Officer:

I certify that the above services were received for the benefit of the University of Hawaii and that payment for such has not been previously made.