



REQUEST FOR PAYBACK AMOUNT

Overview:

This form should only be used if the department cannot recover the overpaid funds electronically via the payroll system. Payments can be made by Personal Check, Cashier's Check, or Money Order.

Process:

- 1.) Complete the form in its entirety making sure to provide a detailed reason why the funds need to be recovered.
- 2.) Make sure all information on the employee's appointment matches the detailed reason. If there is something that cannot be changed in PHR, make sure to provide an explanation.
- 3.) If the employee was paid on multiple accounts, indicate the pay periods paid on each account.
- 4.) Make sure to indicate the percentage of pay on the account(s).
- 5.) If additional space is needed, attach a separate sheet.
- 6.) Sign and date the form (electronic signatures are acceptable).
- 7.) Email form to JoAnne Mealo-Wentz at jmealo@umd.edu.



UNIVERSITY OF MARYLAND

OFFICE OF THE COMPTROLLER
PAYROLL SERVICES

1101-L Chesapeake Building
College Park, Maryland 20742-3121
301.405.5665 TEL 301.405.8685 FAX

REQUEST FOR PAY BACK AMOUNT

Submit Request To: JoAnne Mealo-Wentz
jmealo@umd.edu

Today's Date: _____

Employee Name: _____

UID: _____

Overpayment Reason: _____

For Payroll Services Use Only

PPE	Gross Amount Overpaid	KFS Account	Object Code	% of Pay		GENU Acct	Division Acct

Certification by Department:

I hereby certify that the above information is correct and the overpayment cannot be recovered from a future pay period.

Name

Date

Division/Department

Telephone #