

Louisiana State University Office of Accounting Services Payroll 204 Thomas Boyd Hall

LUMP SUM TIMESH	EET					AS421	
Driving Worktag				Department	Contact	Contact	
Type of Student Transient				Phone	E-mail	E-mail	
Pay Period Start End							
Employee ID	Position Nbr	Employ	yee(Last/First)	Job Description	Workday Earning Code	Amount	
					Total		
I confirm that I have first-hat I certify that approval has be is on file for each title.  Approved by	and knowledge of the work per been obtained from the approp	formed by the aboriate office (Stude	ove employees and that the nts – Student Aid & Schola	e above is an accurate representation of the irships; Transient - HRM). Furthermore, for	L ne work performed during th	e stated period. updated job description	
Supervisor			Printed Name		Date	Date	
Department			Printed Name		Date	Date	
FOR ACCOUNTING SERVICES USE ONLY							
Released by			Date	Vouche	er#		