University of Texas at San Antonio

Payroll Office

Payroll Voucher Form

Assistance:(210) 458-4280

Type Fill-in or Print neatly in ink only

Page of

Department Name

Department Contact/Preparer

Contact Number

Pay Period: Beginning Date End Date

Account Information

Unit No.

Account No.

Account Name

Payment Description

EID	Employee Name	Job Code	Lump Pay Amount		Overtime*	No. of Hours	Pay Rate	Hours Calculated Amount Total	Total Payment
				or	☐			0.00	0.00
				or	☐			0.00	0.00
				or	☐			0.00	0.00
				or	☐			0.00	0.00
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				or	☐			0.00	0.00

Voucher Total 0.00

***Special Note**: Without Request for Overtime Authorization form approved and on file at the Payroll Office, submitted OV5 Overtime Define docs will be held from processing. Employee's Overtime Hours Balance on ET3 must be sufficient to cover voucher payment request of such hours.

I certify this payroll voucher is correct; services herein enumerated have been performed; rates are reasonable and just; and this voucher is properly chargeable to the acount listed above.

Authorized Signature _____ Date

Authorized Name Title

Payroll Office Only

Payroll Control _____ Processed on Payroll _____

Date

Mail **ORIGINAL FORM** to UTSA Payroll Office

Inter-Campus Mail: University Heights (UH)