

**REQUEST FOR ADDITIONAL PAYMENT TO EMPLOYEE
FOR WORK PERFORMED AT ANOTHER STATE AGENCY
(Based on CP-30 Dual Employment Certification Form)**

(form CP30FORM)

Instructions: The borrowing agency is responsible for originating this form in triplicate, using a separate set for each employee. Unless special arrangements have been made for invoicing of the borrowing agency by the parent agency, the Borrowing Agency will forward all copies of CP-30 to the parent agency, accompanied by their check for the employee's services as evidenced by their completion of Section One below. Upon completing Section Two, the Parent Agency budget officer will send the original to his payroll clerk as authorization to pay the borrowed employee his/her additional salary. The second copy will be filed by Parent Agency and the third copy will be returned to the Borrowing Agency. It is the responsibility of the parent agency to avoid over-collection of matching social security tax and/or under-collection of matching retirement.

<u>CERTIFICATION BY BORROWING AGENCY</u>	<u>Analysis of Payment to Parent Agency</u> (Fill in as Applicable)
S <u>UNC School of the Arts</u> Name of Agency E <u>John Smith</u> Name of Employee C <u>Guest Lecturer</u> Nature & Location of Work Provided T <u>January 1-15, 2024</u> Dates Worked I <u>\$1,000</u> Rate & Time if Appropriate O <u>16092-1XXXXX-718140 - OR - 06092-3XXXXX-718140</u> Agency Code and Subhead N <u><i>Dean or Department Head Signature</i></u> Signature of Contracting Agency Official	Salary for Services <u>1000</u> * Travel <u>NA</u> * Subsistence <u>NA</u> Gross due Employee <u>NA</u> Matching Retirement <u>NA</u> Matching Social Security (@ 7.65%) <u>76.50</u> Indirect Expense <u>NA</u> Direct Cost <u>NA</u> Total Payment Due Parent Agency <u>1076.50</u> *Borrowing Agency is assuming liability for accuracy and statutory compliance for these items.

<u>CERTIFICATION BY PARENT AGENCY</u>	
S <u>University of North Carolina at Chapel Hill</u> Name of Agency E <u>John Smith</u> Name of Employee C _____ Classification, Rank or Title T _____ Position Number Social Security Number I _____ Agency Code Subhead Code Retirement Code O I certify that the above amount has been received from the Borrowing Agency and deposited in our account. Pay employee gross salary amount of \$ _____ in addition to regular salary. (This is for Payroll purposes and should not include travel and subsistence.) N _____ Budget Officer (Parent Agency)	We hereby certify that the actual work and the related travel time were both performed on the employee's own time, outside of regular scheduled working hours, and that the employee has not used "company time" to prepare for his services to the borrowing agency. We further certify that this payment is in complete accord with the Budget and Personnel Memorandum dated September 17, 1968, "Uniform Statewide Policy on Dual Employment." _____ Employee _____ Immediate Supervisor _____ Department Head