

## University of California, Davis Damage Payment Report of Services Performed Before Signing Loyalty Oath

Route this form along with Signed State Oath of Allegiance, and a completed Damage Payment Release form to Accounting & Financial Services--Central Payroll Division. A copy of each form should be retained in departmental files, The originals will be retained by Accounting & Financial Services in the employee's personnel file.

To be completed by	DEPARTMENT				Date		
Employee Name (Last, First, Middle Initial)				Department			
Employee ID Fund Source to be Charged				Title Code			
Date Services Performe		Calculation of Payment and Amount Due					
Begin Date		End Date		Note: For Bi-weekly: Hourly Rate x Total Hours			
				For Monthy: Monthly Rate x Total %			
Date Loyalty Oath Sign	ed						
Explanation of why Oa	th not signed pric	or to beginning se	rvice				
			ng policy, based upon legal requ				
			their University employment. It and employees (except aliens)				the mining
	y executeu Outris ji	Title	una employees (except allens)	-	ne they com	•	
Form Completed By		Title		Date		Telephone	
Department Approver	Name	Title		Date		Telephone	
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If the begin date is more Resources	than 120 days befo	ore the request is s	ubmitted, UC Policy requires t	he approval o	f the Assista	nt Vice Chancellor of Hum	nan
Assistant Vice Chanc	ellor-Human Re	sources Only					
Signature					Date		
Central Payroll Office	Only						
Processed By			Processed Date		Payment D	ate	
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