FI 18
09/2022
Division of Finance

Note: Some features may not work when completing the form in the browser. Please download forms to a PDF before entering information. All forms are downloadable PDFs.

Email completed form to: payroll@utah.gov

For questions, please call **(801) 957-7770**

Name

Employee Number

Dept. Code   Unit   Distribution Code

Pay Period Ending
MM/DD/YYYY

Retroactive Regular Pay Worksheet

Section 1   Calculation of Pay Due Employee

Regular Hours Worked and Not Paid ....

X   Normal Rate of Pay ....

=   Additional Straight Time Pay (Wage Type 1179) ......

I have reviewed the above calculation and agree that the amount of retroactive regular pay is correct and should be paid.

Employee Signature _____   Date

Supervisor Name   Title

Supervisor _____   Date

Note: Do not use this form for data entry if a Payroll Warrant Request, form FI 15, has been submitted for these hours.

Section 2   Data Entry (Complete the data entry information below and enter into the Payroll Time & Attendance System).

WAGE TYPE	AMOUNT	FUND	DEPT	UNIT	APPR	ACTV	FUNCTION	PROGRAM	PHASE