## Carnegie Mellon University

## One Time Payment Form

Last Update: 12-13-2024

## Human Resources

**Purpose of this Form**: To request a one-time payment. Requests for faculty or staff should be directed to your HR generalist for processing. Requests for student workers should be directed to your department's designated student transaction initiator. For additional information on how to use one-time payments, refer to the Compensation Guidelines: Activity Pay and One-Time Payments.

		Reques	stor Informatio	n				
Name:	Andrew ID:							
Phone:	Email:							
		Payment	t Recipient De	tail				
Employee Name:		Andrew II	Andrew ID:					
Supervisory Org:		Pay Frequency:						
Position:				Academic Period:				
		One-Time	e Payment Det	ails				
One-Time Payment F	Reason:							
Requested Payment	Currency: Amount*:							
SPA Approval Neede	ed:		*Threshold a	approval ne	ecessary for one	e-time payme	ents in excess of \$10,000.	
		Chargi	ng Instruction	S				
GL AMT OR %	FUNDING	FUNCTION	ACTIVITY		COST CTR (ORG)		BUS UNIT (ENTITY)	
GA AMT OR %	PROJECT		TASK		AWARD		EXPENDITURE ORG	
	Requesting ( ary position's approve supply the correct app		is transaction.	If the em	ployee does	not hold a		
Supervisor	Financial Approver							
Supervisor's Supervi	ALG Member							
Human Resources Business Partner			Threshold Approver					
			For faculty or	staff - S	ubmit compl	eted form	to your HR generali	
	For student workers - Submit completed form to your department designated student transaction initiator.							