

**WORKSHEET—Supplement to Military Pay**  
**University of California**  
**(R7/22)**

PERSONAL INFORMATION		
EMPLOYEE NAME	EMPLOYEE NUMBER	DATE
LOCATION	DEPARTMENT	APPOINTMENT TYPE (Staff or Faculty)
MILITARY SERVICE BRANCH	MILITARY RANK	DATE MILITARY LEAVE BEGINS
SUPPLEMENT TO MILITARY PAY Not to exceed tour of active duty, or two years, dating back to December 14, 2001 (lifetime limit), whichever comes first.	SUPPLEMENT TO MILITARY PAY START DATE	SUPPLEMENT TO MILITARY PAY END DATE

**MONTHLY MILITARY GROSS PAY (Enter base pay and all allowances that apply)**  
**ATTACH LEAVE EARNINGS STATEMENT**

1. MILITARY GROSS PAY:	\$ _____
2. BASE PAY:	\$ _____
<b>ALLOWANCES:</b>	
BAQ:	_____
Hazardous Duty:	_____
Flight Pay:	_____
Foreign Duty:	_____
Driving Pay:	_____
Clothing Allowance:	_____
Foreign Language Proficiency:	_____
Medical/Dental Officers:	_____
Active Duty Reserved Medical Officers:	_____
Other:	_____
Other:	_____
Other:	_____
Other:	_____
3. TOTAL MILITARY GROSS PAY:	\$ _____

**GROSS SUPPLEMENTAL PAY (To be completed by employee's department<sup>1</sup>)**

4. UC "REGULAR" GROSS PAY - PAID	BIWEEKLY (Use Line 5)	SEMI-MONTHLY (Use Line 6)	MONTHLY (Use Line 7)
5. BIWEEKLY COMPUTATION	\$ _____ x26 = \$ _____	\$ _____ /12 = \$ _____	\$ _____
6. SEMI-MONTHLY COMPUTATION	\$ _____ x24 = \$ _____	\$ _____ /12 = \$ _____	\$ _____
7. MONTHLY REGULAR GROSS PAY	\$ _____		
8. UC MONTHLY "REGULAR" GROSS PAY (From Line 5, 6 or 7)	\$ _____		
9. TOTAL MONTHLY GROSS MILITARY PAY (From Line 3)	\$ _____		
10. GROSS SUPPLEMENTAL PAY <sup>2</sup>	\$ _____		

<sup>1</sup> If an exempt employee is receiving supplemental military pay, job earning distribution (JED) codes are entered in the employee job data record and Leave No Pay JED (LPJ) should be included on the employee extended absence request to reduce their regular earnings by the amount issued by the military for the supplement. For exempt, JED must equal 100%; enter LPJ for the military pay amount and REG for the regular hours so that the total JED percentage equals 100%. If the employee is non-exempt and are receiving supplemental military pay, an additional pay transaction should be submitted with the earnings code of SMP to issue the amount of supplemental pay owed to the employee.

<sup>2</sup> If line 9 is greater than line 8, enter zero. No Supplemental Payment is due. Otherwise enter difference between lines 8 and 9.

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**OPTIONAL VOLUNTARY EMPLOYEE DEDUCTIONS**

11. Voluntary employee deductions will continue to be withheld unless cancelled by submittal of the appropriate cancellation forms. Indicate below which cancellation forms you need. Your department will provide the appropriate forms and/or contact information.

- Medical (Indicate Plan Name): \_\_\_\_\_
- Dental
- Vision
- Life Insurance
- Disability
- Accident & Disability
- Life Insurance
- Parking
- Union Dues
- Other (Please list): \_\_\_\_\_

**OPTIONAL DIRECT DEPOSIT**

12. Disbursement Instructions

- I want to continue with direct deposit.
- I want to enroll in direct deposit. (Attach direct deposit enrollment form)
- I want to cancel direct deposit. (Attach direct deposit enrollment form)
  - Forward my check to: \_\_\_\_\_

**CERTIFICATION**

I understand it is my responsibility to document or estimate my military pay and allowances for the purpose of determining the amount of supplemental military pay received from the University; that I must submit my actual Military Leave and Earnings Statement (LES) for all months for which I receive supplemental military pay due to me; and that I am responsible for returning to the University of California any overpayments made to me.

EMPLOYEE SIGNATURE	DATE	DEPARTMENT HEAD SIGNATURE	DATE
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Person holding Power of Attorney of behalf of Employee (Attach documentation)