

Late Pay Reimbursement Request Form

Employees may request reimbursement of late fees and banking fees resulting from delays in receiving employment related pay that was caused by the university. Each request will be reviewed and evaluated, and if the late payment is determined to have been caused by the University, a reimbursement of late fees and/or banking fees will be processed. Please email the completed form and supporting documentation to ucrpayroll@ucr.edu using the subject line "Late Pay Reimbursement Request".

General Employee Information	
Date Requested	
Employee First and Last Name	
Employee Id Number (e.g. 10XXXXXX)	
Department associated with paid position	
Are you enrolled in direct deposit for paychecks?	
Employee's Mailing Address	
Reimbursement Request	
Date paycheck expected	
Date paycheck received	
Total amount pay received late	\$
Type of fee(s) requested for reimbursement (e.g. late fee, returned check fee, etc.)	
Total amount of late fees	\$
Please explain the situation that resulted in late pay and the assessment of late fees	
<p>Certifications: 1) The information provided above is an accurate account of the situation; 2) the late fees requested are a direct result of the university's error that caused a delay in receiving my employment related pay; 3) documentation outlining the late fees assessed will be submitted with this request for reimbursement (this may include copies of my bank statement or other bills with the late fee clearly indicated); 4) if the reimbursement is approved, I understand the reimbursement will be processed either as a direct deposit or a mailed paper check to the address indicated above; and 5) I confirm the information provide is correct.</p>	
Employee's Signature and Date Signed	
Employee's contact email address	
Employee's contact phone number	
Accounting Office Use Only	
Reviewed By/Date	
Recommendation	
Approved By/Date	
Date Employee Notified of Decision	
ePay ID	