

LEA PAYROLL CERTIFICATION FORM

Email signed form and Pay01 to: production@scoe.org by Noon the day Payroll is Due

LEA Name: _____ LEA No: _____

Payroll Dated: _____ Payroll Submitted: _____

___ Regular Payroll _____ Supplemental Payroll

___ Charter Mid-Month Payroll Accrual: ___ July Prior Year

___ YWE/RESIG _____ August Prior Year

Payroll Gross \$ _____

Payroll Net \$ _____

Date: _____

Payroll Technician

CHECKLIST FOR CBO's

Please check each applicable report verifying reviewed and approved:

___ Pay01 Payroll Summary (*email with certification form*)

___ Pay99 Payroll Status

___ Pay22 Payroll Errors (*any remaining errors have been verified by SCOE
Business Services Retirement Analysts and/or IT*)

___ Pay15 Payroll Adjustments (with Regular Payroll)

___ Retire25 STRS Errors (*with Supplemental & Regular Payroll*)

___ Pay13 Payroll Adjustments (*with Supplemental Payroll*)

Print Name of Authorized Signer:

Authorized Signature: _____ **Date:** _____

By signing this form I certify that I have validated correct compensation, retirement and payroll tax reporting, have reviewed the reports as appropriate and approve the above payrolls.

Revised 05/16/2022