NEW RIVER COMMUNITY COLLEGE
SPECIAL PAYMENTS TO PERSONNEL
REQUEST FROM STATE OR LOCAL FUND**S**

Directions: Please provide the information requested below so that your request may be processed promptly.

Print recipient's name SSN or Employee ID Number

Print recipient's home address

Dates services are being provided to the College

Briefly state why the College is paying the recipient

Payment amount $ _____ *AIS account to charge _____

☐ **NRCC employee (send completed form to Human Resources Office)**
☐ **Not NRCC employee (send completed form to Business Office)**

Authorized by _____
(If a College employee is being paid, the signature of the supervisor of that employee)

Paid by _____
(Signature of the appropriate Vice President of the account being charged)

Approved by _____
(Signature of the President or Vice President for Finance and Administrative Services)

Date of approval _____

FOR BUSINESS OFFICE USE Local Fund Payments	**FOR HUMAN RESOURCES USE** For Payments to Employees
Check # _____	Voucher # _____
Check Date _____	Pay Date _____
VP.Finance _____	VP Finance _____

*If payment will be tendered to an employee of NRCC, the AIS account to be charged must pay NRCC's share of FICA. Staff in the Human Resources Office can provide you the cost of NRCC's share of FICA.