Louisiana State University
Office of Accounting Services
Payroll
204 Thomas Boyd Hall

LUMP SUM TIMESHEET **AS421**

Driving Worktag		
Type of Employee	☐ Student	☐ Transient
Pay Period	Start	End

Department	Contact
Phone	E-mail

Employee ID	Position Nbr	Employee(Last/First)	Job Description	Workday Earning Code	Amount
				Total	

I confirm that I have first-hand knowledge of the work performed by the above employees and that the above is an accurate representation of the work performed during the stated period.
I certify that approval has been obtained from the appropriate office (Students – Student Aid & Scholarships; Transient - HRM). Furthermore, for students, I certify that an updated job description is on file for each title.

Approved by

_____ _____ _____
Supervisor Printed Name Date

_____ _____ _____
Department Printed Name Date

FOR ACCOUNTING SERVICES USE ONLY

Released by_____ Date _____ Voucher # _____

Rev 06/16