



## PAYROLL INSTRUCTIONS

*Form must be completed by PI/Budget Authority*

*Upon completion, please email form as an attachment to Deb Malarek at [dmalarek@uw.edu](mailto:dmalarek@uw.edu)*

Employee's Name \_\_\_\_\_

Employee's FTE \_\_\_\_\_

***Please note: Budget percentages below must add up to 100%!***

Start Date	End Date	Budget #	Budget Name	%
			<b>TOTAL</b>	

Completed by (PI/Budget Authority) \_\_\_\_\_

Date Completed \_\_\_\_\_