

## **USC Salary Authorization Form July 2011**

Study Teams complete the USC Salary Authorization Form and email to:  
[SalaryPO@Health-Research.org](mailto:SalaryPO@Health-Research.org)

Many cells within this form are locked with formulas that serve to prevent data entry errors. Data entry can only occur in certain cells, which helps the user to complete the form properly.

\*\* All yellow sections are for HRA use only.

Type **Employee's name** and **Position on Project**.

Enter **Salary** amount for either **Monthly** or **Bi-Weekly** dependent upon the Employee's status. USC will invoice HRA for salaries at the end of each month. There must be sufficient project funds available to cover each USC invoice, so please be sure to allocate enough funds to cover the time period entered.

**Fringe Benefit Rate** for **Monthly** or **Bi-Weekly** will automatically be calculated once you enter the salary amount. HRA will change the Salary Authorization Form accordingly to most recent Fringe Benefit Rate. Please ensure you are using the most updated form.

Note: The fringe rate effective July 1, 2011 is 34%.

**Total Salary & Fringe** will automatically be calculated.

**Number of Months/Bi-Weekly Periods to cover** – Enter a number to indicate how many months or Bi-Weekly periods the Salary Authorization Form should cover.

Bi-Weekly = 2 weeks – For 2 weeks enter 1, for 4 weeks enter 2, and so on.

**Total Salary PO** – the amount will automatically be calculated for you after entering the Number of Months/Bi-Weekly.

**Time Period** – Enter the dates for which you would like this Salary Authorization to cover the employee.

**Vendor** – Enter the appropriate vendor the Salary Authorization Form should be applied.  
i.e.: Keck School, Norris Hospital, Dentistry School.

**Project Number and Amount** – Enter the HRA Project number(s) and the corresponding amounts where funds should be taken. The Total Salary PO must match the total salary PO above.

**Authorized Signature, Date, and Phone Number/Email** – Authorized signer must be on file with HRA with the respective project(s) from above. He or she must also be the person to email completed form to salaryPO email.

All areas mentioned above must be entered correctly, otherwise it will be returned to sender.

Once the Salary Authorization Form is approved and processed, an email confirmation will be sent along with the completed form.

Each PO will be closed at end of Fiscal Year and any unused funds will be released back to the project.