



# S.C. Office of Comptroller General

Revised April 2021

## Off-Cycle Bonus Payroll Request Form

Agency # and Name \_\_\_\_\_

For Pay Date \_\_\_\_\_

### Bonus Off-Cycle Payroll

PRNR # _____	Name _____	Gross Amt _____	Justification _____
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Total \$ \_\_\_\_\_ - \_\_\_\_\_

Authorized Agency Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name and Title \_\_\_\_\_ Phone # \_\_\_\_\_

Finance Director Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name and Title \_\_\_\_\_ Phone # \_\_\_\_\_

**• Bonus requests must be submitted 4 business days prior to scheduled off-cycle run date.**

- *Off-Cycle Check Request Forms must be signed by authorized agency personnel.*
- *Off-Cycle Bonus must have attached the approved DSHR Bonus Form backing up the justification.*
- *Additional documentation may be requested as needed and bonus runs delayed as required.*

Email to: [cgpayroll@cg.sc.gov](mailto:cgpayroll@cg.sc.gov) (OR) Fax form to 803-734-1765