

**SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60**

1. **Purpose.** The SALARY ASSIGNMENT/CANCELLATION, SAFORM D-60 is used for reporting net salary and voluntary deduction assignments and for changing or canceling previously reported assignments of the following types:
 - (a) Annuity Plan Premium
 - (b) Additional Retirement or Retroactive FICA
 - (c) Net Salary Assignment
 - (d) Cottage Rental
 - (e) Federal Credit Union
 - (f) Deferred Compensation Plan
 - (g) Delinquent Tax Assessment
 - (h) Employee Organization
 - (i) Hawaiian Home Lands
 - (j) Court-Ordered Support (Voluntary)
 - (k) Parking Fee
 - (l) Priority Payroll
 - (m) Public Schools/State Library Foundation Donation
 - (n) Community Fund Donation
 - (o) U. of H. Foundation Donation
 - (p) U. S. Civil Service Commission
 - (q) Workers' Compensation Retirement
 - (r) Pre-Employment Health Exam

2. **Prepared By.** The employee with the assistance of the appropriate office within the employing department or with the assistance of the agent (assignee).

3. **Frequency.** Daily as required.

SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60

4. Distribution.

(a) Forms for new or revised assignments should be submitted to Central Payroll, DAGS on a daily basis, but no later than 4:00 p.m. of the first workday of the month, if they are to be reflected in payrolls for that month. Exceptions:

- (1) Net salary assignment (BA), annuity plan premium (AP), deferred compensation (DC), parking fee (PK), and workers' compensation retirement (WR) should be submitted no later than 4:00 p.m. of the first workday of either payroll period in a month, if they are to be reflected in that payroll period.
- (2) Priority payroll (PP) should be submitted no later than 12:00 noon of the fifth workday of either payroll period in a month, if the deduction is to be reflected in that payroll period.

(b) Forms for assignment cancellations should be submitted to Central Payroll, DAGS on a daily basis, but no later than 4:00 p.m. of the first workday of either payroll period in a month, if they are to be reflected in that payroll period.

(c) Each copy of the form is distributed as follows:

(1) If completed at employing department.

Copy #1 - To Central Payroll (after agent, if required); to data processing center; and to Central Payroll for verification and control filing.

Copy #2 - To agent for reference filing.

Copy #3 - Retained by department for payroll verification and filing into employee's personnel jacket.

Copy #4 - Retained by department, and routed to the employee for his personal record.

(2) If completed at agent's office.

Copy #1 - To Central Payroll; to data processing center; and to Central Payroll for verification and control filing.

Copy #2 - Retained by the agent for reference filing.

Copy #3 - To employing department for payroll verification and for filing into employee's personnel jacket.

Copy #4 - To employing department for payroll verification; and to the employee for his personal record.

SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60

ITEM NO.	DATA AND DATA INSTRUCTIONS
①	DEPARTMENT - Enter the title of the department in which the employee is employed.
②	SUBDIVISION OR SCHOOL - Enter the title of the subdivision or school in which the employee is employed.
③	FORM NO. - Form number to be assigned by data processing center.
④	SOCIAL SECURITY NO. - Enter the employee's social security number.
⑤	LAST NAME, FIRST NAME, MIDDLE INITIAL - Enter the employee's name in the following sequence: Last name, first name, middle initial. The name must be identical with the name reflected on the EMPLOYEE'S EARNINGS AND DEDUCTIONS STATEMENT. A comma must be placed between the last name and the first name; do not use a comma elsewhere in the name.
⑥	<p>TYPE - Enter the assignment type code.</p> <p>AP - Annuity Plan Premium AR - Additional Retirement or Retroactive FICA BA - Net Salary Assignment CR - Cottage Rental CU - Federal Credit Union DC - Deferred Compensation Plan DT - Delinquent Tax Assessment EO - Employee Organization HH - Hawaiian Home Lands OS - Court-Ordered Support (Voluntary) PE - Pre-Employment Exam PK - Parking Fee PP - Priority Payroll PS - Public Schools/State Library Foundation Donation UF - Community Fund Donation UH - U. of H. Foundation Donation US - U. S. Civil Service Commission WR - Workers' Compensation Retirement</p>

STATE OF HAWAII

Accounting Manual

Volume III: Payroll Expenditures

Part 700: Appendix - Instructions and Related Sample Forms

Page 741.04

SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60

ITEM NO.	DATA AND DATA INSTRUCTIONS
7	<p>AGENT - Enter the code assigned to the agent (assignee) who is to receive the assignment.</p> <ol style="list-style-type: none"> 1. Refer to the AGENT NAME AND ADDRESS LIST for the applicable code. 2. If the agent is not established on the AGENT NAME AND ADDRESS LIST, the department makes a request to Central Payroll for the establishment of the agent on the file. Central Payroll will assign an agent code and periodically notify all departments of changes in the AGENT NAME AND ADDRESS LIST.
8	<p>PLAN - To be used by the agent (assignee) on an optional basis. However, a plan code may be used only if it has been properly authorized. Request for the addition of a new plan code by the agent must be submitted to the State Comptroller. Refer to TABLE II: PLAN CODES FOR PAYROLL DEDUCTIONS for a list of valid plan codes.</p>
9	<p>I. D. NO. - To be used by the agent (assignee) on an optional basis. For net salary assignments to banks, enter the employee's account number as assigned by the banks. The I. D. NO. must be limited to eight (8) characters. (Note: Characters include numerics, alphas and other symbols.) There are no other restrictions for the use of this field.</p>
10	<p>DEPT - Enter the one (1) character alpha code of the department in which the employee is employed. Refer to TABLE I: LIST OF DEPARTMENTS for the codes assigned to the departments.</p>
11	<p>THE UNDERSIGNED HEREBY: <input type="checkbox"/> ASSIGNS OR <input type="checkbox"/> CANCELS - Enter an "X" in the appropriate box.</p>
12	<p><input type="checkbox"/> \$ _____ AND \$ _____ - Enter an "X" in this box if a fixed dollar amount is to be deducted. Then, enter the dollar amount that is to be deducted for the first month and the dollar amount that is to be deducted for subsequent months in the appropriate spaces. If the dollar amount to be deducted for the first month and for subsequent months is the same, indicate the amount only on the first line.</p> <p>If TYPE in Item (6) is BA (Net Salary Assignment), a fixed dollar amount cannot be deducted.</p> <p align="center">Example: <u>\$50.00</u> THE FIRST MONTH AND <u>\$75.00</u> EACH MONTH THEREAFTER</p>

SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60

ITEM NO.	DATA AND DATA INSTRUCTIONS
13	<p><input type="checkbox"/> PERCENT EACH MONTH - Enter an "X" in this box if a percentage of the gross pay is to be deducted. Then, enter the percentage, to two (2) decimal places, in the appropriate space. Use of the percentage is only allowed for assignment types AP and DC.</p> <p><u>Example:</u> A 25 percent deduction will be recorded as <u>25.00%</u></p>
14	<p><input type="checkbox"/> MY NET WAGES - Enter an "X" in this box if the employee's net wages (salary) are to be assigned. If net wages are assigned, the TYPE field in Item 6 must contain the code, BA, indicating a net wages (salary) assignment.</p>
15	<p>o EFFECTIVE . . . - Enter the date when the assignment or cancellation is to take effect.</p> <p><u>For Assignment:</u> Deduction will begin in the payroll period recorded. Thus, any date recorded from the 1st to the 15th of a month will indicate that the deduction is to begin in the first half payroll period of the month. Any date recorded from the 16th to the 30th (31st) of a month will indicate that the deduction is to begin in the second half payroll period of the month.</p> <p><u>For Cancellation:</u> Deduction will terminate in the payroll period recorded. Thus, any date recorded from the 1st to the 15th of a month will indicate that the deduction will not be taken in the first half payroll period of the month.</p>
16	<p>o WITH ENDING . . . - Enter the date when the termination of the assignment is to take effect. Any date recorded from the 1st to the 15th of the month will indicate that no deduction is to be taken in the first half payroll period of the month. Item 16 cannot be used when Item 17 is filled-in.</p>
17	<p>o WHEN MY COMMITMENT OF \$_____ IS PAID OR UPON RECEIPT OF MY ASSIGNMENT CANCELLATION - Enter the total dollar amount, accumulation of which will terminate the assignment. "BA" assignments cannot be terminated by these means. Item 17 cannot be used when Item 16 is filled-in.</p> <p>If both Item 16 (the final assignment date) and Item 17 (the commitment amount) are left blank, then the assignment will continue until an assignment cancellation is submitted.</p>
18	<p>FOR AGENCY USE - This area is to be used only by the agent, as required.</p>
19	<p>The date and signature of the employee.</p>

SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60

ITEM NO.	DATA AND DATA INSTRUCTIONS
20	<p>Enter the agent's name, address and zip code. The date and signature of the agent (assignee) are required only for the following types of assignments:</p> <ol style="list-style-type: none">1. AP - Annuity Plan Premium2. AR - Additional Retirement or Retroactive FICA3. BA* - Net Salary Assignment * Signed approval by assignee is not required for cancellation.4. CR - Cottage Rental5. CU - Federal Credit Union6. DC - Deferred Compensation7. HH - Hawaiian Home Lands8. PK - Parking Fee

SECTION 741: INSTRUCTIONS FOR COMPLETING SALARY ASSIGNMENT/CANCELLATION,
STATE ACCOUNTING FORM D-60

TABLE I: LIST OF DEPARTMENTS

<u>Code</u>	<u>Department</u>
A	Agriculture
B	Business, Economic Development, and Tourism
C	Land and Natural Resources
D	Transportation
E	Education
F	University of Hawaii
G	Defense
H	Health
I	Hawaiian Home Lands
J	Judiciary
K	Human Services
L	Labor and Industrial Relations
M	Accounting and General Services
N	Attorney General
O	Budget and Finance
P	Human Resources Development
Q	Governor
R	Commerce and Consumer Affairs
S	Lieutenant Governor
T	Taxation
U	City and County of Honolulu
V	Public Safety
W	County of Hawaii
Y	Legislature
Z	Office of Hawaiian Affairs

TABLE II: PLAN CODES FOR PAYROLL DEDUCTIONS

<u>Plan Code</u>	<u>Type of Plan</u>	<u>Type of Assignment</u>
003	Additional Retirement) (AR) Additional Retirement
004	Retroactive FICA) or Retroactive FICA
S	Savings Account) (BA) Net Salary
C	Checking Account) Assignment
Various;	no restrictions for parking plan codes.) (PK) Parking Fee for DAGS
) Parking Control only

STATE OF HAWAII

Accounting Manual

Volume III: Payroll Expenditures

Part 700: Appendix - Instructions and Related Sample Forms

Page 742.02

EXHIBIT B: FILLED-OUT SAMPLES OF SAFORM D-60

STATE OF HAWAII		SALARY ASSIGNMENT/CANCELLATION							
DEPARTMENT ACCOUNTING & GENERAL SERVICES				SUB-DIVISION OR SCHOOL UNIFORM ACCOUNTING & REPORTING BRANCH					
FORM NO.	SOCIAL SECURITY NO.	LAST NAME, FIRST NAME, MIDDLE INITIAL		TYPE	AGENT	PLAN	I.D. NO.	DEPT	
575	32 5917	DOE, JOHN E.		CU	701			M	
THE UNDERSIGNED HEREBY: <input checked="" type="checkbox"/> ASSIGNS OUT OF ANY COMPENSATION FROM THE STATE OF HAWAII				OR		<input type="checkbox"/> CANCELS		FOR AGENCY USE	
(CHECK ONE BOX ONLY, IF "ASSIGNS")				EFFECTIVE WITH THE PAYROLL PERIOD THAT INCLUDES		MONTH		DEDUCTION	
<input checked="" type="checkbox"/> \$ 17 14 THE FIRST MONTH				07 / 01 / 92				AMOUNT	
AND \$ _____ EACH MONTH THEREAFTER				WITH ENDING DEDUCTIONS FOR THE PAYROLL PERIOD PRIOR TO		MONTH DAY YEAR		DUES	
<input type="checkbox"/> PERCENT EACH MONTH _____ %				WHEN MY COMMITMENT OF \$ _____ IS PAID OR UPON RECEIPT OF MY ASSIGNMENT CANCELLATION.		MONTH DAY YEAR		LIFE INS.	
<input type="checkbox"/> MY NET WAGES								INC. PROT.	
I CERTIFY THAT I WILL ABIDE BY THE REGULATION SET FORTH ON THE REVERSE SIDE OF THIS APPLICATION				TYPE AGENT'S NAME, BRANCH, ADDRESS, AND ZIP CODE HERE				CR. UNION	
06/24/92 <i>John E. Doe</i>				Hawaii Federal Credit Union					
DATE EMPLOYEE OR AUTHORIZED SIGNATURE				2020 North King Street					
				Honolulu, HI 96819					
				06/24/92 <i>Mary K. Smith</i>					
				DATE AUTHORIZED SIGNATURE OF ASSIGNEE				TOTAL	
STATE COMPTROLLER (CENTRAL PAYROLL)								STATE ACCOUNTING FORM D-60 JULY 1, 1992 (REVISED)	

STATE OF HAWAII		SALARY ASSIGNMENT/CANCELLATION							
DEPARTMENT ACCOUNTING & GENERAL SERVICES				SUB-DIVISION OR SCHOOL UNIFORM ACCOUNTING & REPORTING BRANCH					
FORM NO.	SOCIAL SECURITY NO.	LAST NAME, FIRST NAME, MIDDLE INITIAL		TYPE	AGENT	PLAN	I.D. NO.	DEPT	
575	32 5917	DOE, JOHN E.		BA	240	C	12345678	M	
THE UNDERSIGNED HEREBY: <input checked="" type="checkbox"/> ASSIGNS OUT OF ANY COMPENSATION FROM THE STATE OF HAWAII				OR		<input type="checkbox"/> CANCELS		FOR AGENCY USE	
(CHECK ONE BOX ONLY, IF "ASSIGNS")				EFFECTIVE WITH THE PAYROLL PERIOD THAT INCLUDES		MONTH		DEDUCTION	
<input type="checkbox"/> \$ _____ THE FIRST MONTH				07 / 01 / 92				AMOUNT	
AND \$ _____ EACH MONTH THEREAFTER				WITH ENDING DEDUCTIONS FOR THE PAYROLL PERIOD PRIOR TO		MONTH DAY YEAR		DUES	
<input type="checkbox"/> PERCENT EACH MONTH _____ %				WHEN MY COMMITMENT OF \$ _____ IS PAID OR UPON RECEIPT OF MY ASSIGNMENT CANCELLATION.		MONTH DAY YEAR		LIFE INS.	
<input checked="" type="checkbox"/> MY NET WAGES								INC. PROT.	
I CERTIFY THAT I WILL ABIDE BY THE REGULATION SET FORTH ON THE REVERSE SIDE OF THIS APPLICATION				TYPE AGENT'S NAME, BRANCH, ADDRESS, AND ZIP CODE HERE				CR. UNION	
06/24/92 <i>John E. Doe</i>				First Bank of Honolulu					
DATE EMPLOYEE OR AUTHORIZED SIGNATURE				1151 Punchbowl Street					
				Honolulu, HI 96813					
				06/24/92 <i>Mary K. Smith</i>					
				DATE AUTHORIZED SIGNATURE OF ASSIGNEE				TOTAL	
STATE COMPTROLLER (CENTRAL PAYROLL)								STATE ACCOUNTING FORM D-60 JULY 1, 1992 (REVISED)	

September 1, 1985