SECTION 806: EXPLANATION OF THE TURNAROUND PAYROLL CHANGE SCHEDULE, STATE ACCOUNTING FORM D-94

1. Purpose.

   (a) The turnaround SAFORM D-94 is generated by the computer, with the data-fields pre-recorded to facilitate the preparation of this form for the departments who subsequently submit them for payroll processing.

   (b) The pre-recorded data are based on the latest NOTIFICATION OF PERSONNEL ACTION, STATE DPS FORM 5 processed and accepted by the payroll system.

2. Prepared By. Data processing center for use by reporting departments.

3. Frequency. For each pay period, the turnaround, SAFORM D-94, is printed four (4) workdays before the start of the next payroll period.

4. Distribution. The turnaround, SAFORM D-94, is routed through Central Payroll to the reporting departments.

5. Input Procedure.

   (a) Follow the INSTRUCTIONS FOR COMPLETING PAYROLL CHANGE SCHEDULE, SAFORM D-94 (Section 706, Volume III).

   (b) If any of the pre-recorded data is to be changed, line out the original data and enter the new data above or below it as appropriate. All changes to be key-entered must be made in red ink.

   (c) When deleting an employee from the turnaround, SAFORM D-94, draw a red line through all data except the Employee Number. Use a color other than red when making notations for auditing purposes. Try to keep notations in the Remarks field or extend on back of the page.

6. Limitations.

   (a) Turnaround SAFORM D-94's printed prior to the last pay period should not be used except as provided in item 6(b). The employee number changes from pay period to pay period and will not be valid except on a turnaround, SAFORM D-94, immediately following the period.

   (b) When a prior turnaround, SAFORM D-94, must be used (such as in payments made to board members who receive pay only once a month), the words "KEY COMPLETE" should be written boldly on the top of each page of the turnaround, SAFORM D-94. Be sure to cross out the employee number.

EXHIBIT A: TURNAROUND COPY OF SAFORM D-94

STATE OF HAWAII
PAYROLL CHANGE SCHEDULE
TURNAROUND P/R CHANGE SCHEDULE

REGULAR/HOURLY
TURNAROUND FOR: 07/31/89
PAY PERIOD ENDING: July 15, 1989

PAYROLL NO.

EMPLOYEE NUMBER	NAME (LAST, FIRST, MIDDLE) / SOCIAL SECURITY NUMBER	BU	REGULAR STATUTORY DUES	RETRO STATUTORY DUES							OTHER GROSS		POSITION NO	UNIFORM ACCOUNTING CODE								GROSS AMOUNT	TIME UNITS	RATES			WAGES-IN-KIND OR COLA		REMARKS
														APPROPRIATION	SUB DIVISION	OBJECT	FUNCTION	LOCATION	PROJECT					CODE	AMOUNT		CODE	AMOUNT	
007732	HHHH, FIRST M I 111-11-3973		001	F	M	00	00	1	A	2	B 581.51 F 100.00	1 2	00037 00037	S301Z G305Z	001 001	2000 2000						290.76 290.75							
007740	IIII, FIRST M I 111-11-7517		001	F	D	03	03	1	A	2	B 476.00 F 100.00	1	00064	S301Z	001	2000						476.00							
007757	JJJJ, FIRST M I 111-11-7286		001	M	M	00	03	1	A	2	B 753.88 F 100.00	1 2	00008 00008	S301Z G305Z	001 001	2000 2000						376.94 376.94							
007765	KKKK, FIRST M I 111-11-9510		001	F	S	01	01	1	A	2	B 615.46 F 100.00	1 2	00041 00041	G305Z S301Z	001 001	2000 2000						307.73 307.73							
007773	LLLL, FIRST M I 111-11-8690		001	F	M	00	00	1	A	2	B 600.55 F 100.00	1 2	00025 00025	G305Z S301Z	001 001	2000 2000						300.28 300.27							
007781	MMMM, FIRST M I 111-11-9689		001	M	M	01	01	1	A	2	B 600.00 F 100.00	1	00066	S201Z	001	2000						600.00							
007799	NNNN, FIRST M I 111-11-2652		001	F	S	01	01	1	A	2	B 482.60 F 100.00	1 2	00022 00022	S301Z G305Z	001 001	2000 2000						241.30 241.30							
007807	OOOO, FIRST M I 111-11-9420		001	M	S	02	02	1	A	2	B 714.00 F 100.00	1	00043	S301Z	001	2000						714.00							
007815	PPPP, FIRST M I 111-11-5687		001	M	M	00	00	1	A	2	B 793.50 F 100.00	1	00065	S301Z	001	2000						793.50							

I CERTIFY THAT THE WITHIN PAYROLL WITH CHANGES AND ADJUSTMENTS AS NOTED REPRESENTS A TRUE AND LEGAL PAYROLL OF THE DEPARTMENT FOR THE

PAY PERIOD ENDING

TOTAL OTHER GROSS

APPROVED FOR PAYMENT

TOTAL GROSS AMOUNT 5,617.50

TOTAL TIME UNITS

TOTAL WAGES-IN-KIND

DATE ENTERED BY

DATE VERIFIED BY

AUDITED BY

TOTAL COST OF LIVING

BALANCED BY CONTROL

AUTHORIZED SIGNATURE

DATE

CLAIMS PRE AUDIT SUPERVISOR
PRE AUDIT BRANCH

DATE

EXHIBIT B: SAMPLE OF CORRECTED REGULAR TURNAROUND, SAFORM D-94

STATE OF HAWAII

PAYROLL CHANGE SCHEDULE

TURNAROUND P/R CHANGE SCHEDULE

REGULAR/HOURLY

TURNAROUND FOR: 07/31/89

PAYROLL NO. _____

PAY PERIOD ENDING: July 15, 1989

EMPLOYEE NUMBER	NAME (LAST, FIRST, MIDDLE) / SOCIAL SECURITY NUMBER	BU	REGULAR STATUTORY DUES	RETRO STATUTORY DUES							POSITION NO.	UNIFORM ACCOUNTING CODE: APPRO APPLICATION	SUB DIVISION	SUBJECT	FUNCTION	LOCATION	PROJECT	LINE CODE	TYPE PAY CODE	GROSS AMOUNT	TIME UNITS	RATES: CODE	RATES: AMOUNT	WAGES-IN-KIND OR COLA: CODE	WAGES-IN-KIND OR COLA: AMOUNT	REMARKS
007732	HHHH, FIRST M I 111-11-3973		001 F M	00 00	1	A	2		B 581.51 F 100.00	1 2	00037 00037	S301Z G305Z	001 001	2000 2000						290.76 290.75						
007740	IIII, FIRST M I 111-11-7517		001 F D	03 03	1	A	2		B 476.00 F 100.00	1	00064	~~S301Z~~ G305Z	001	2000					R	~~500.00~~ 476.00 100.00						Prom. eff 6/1/89
007757	JJJJ, FIRST M I 111-11-7286	13	~~001~~ 004 M M 20.00	00 03	1	A	2		B 753.88 F 100.00	1 2	~~00008~~ 00040 00008	S301Z G305Z	001 001	2000 2000						376.94 376.94				W	10.00	
007765	KKKK, FIRST M I 111-11-9510		001 F S	01 01	1	A	2		~~B 615.46~~ 750.00 ~~F 100.00~~ 50.00	1 2	00041 00041	G305Z S301Z	001 001	2000 2000					E E	307.73 307.73						
007773	LLLL, FIRST M I 111-11-8690	03	001 F M 18.50	~~00 00~~ 01 (02) 46.50	1	A	2		B 600.55 F 100.00	1 2	00025 00025	G305Z S301Z	001 001	2000 2000						300.28 300.27						
007781	MMMM, FIRST M I 111-11-9689		001 M M	01 01	1	A X	2		B 600.00 F 100.00	1	00066	S201Z	001	2000					V	~~600.00~~ 9,999.99				9		COB 6/24/89
007799	NNNN, FIRST M I ~~111-11-2652~~ 999-99-4511		001 ~~F~~ M S	01 01	1	A	~~1~~ 2 A		B 482.60 F 100.00	1 2	00022 00022	S301Z G305Z	001 001	2000 2000						241.30 241.30						
007807	0000, FIRST M I 111-11-9420		001 M S	02 02	1	~~A~~ B	2		B 714.00 F 100.00	1	00043	S301Z	001	2000						714.00						
007815	~~PXXX~~ ~~0000~~, FIRST M I 111-11-5687		001 M M	00 00	1	A	2		B 793.50 F 100.00	1	00065	S301Z	001	2000						793.50						

I CERTIFY THAT THE WITHIN PAYROLL WITH CHANGES AND ADJUSTMENTS AS NOTED REPRESENTS A TRUE AND LEGAL PAYROLL OF THE DEPARTMENT FOR THE PAY PERIOD ENDING _____

TOTAL OTHER GROSS

APPROVED FOR PAYMENT

TOTAL GROSS AMOUNT 15,141.49 ~~5,617.50~~

TOTAL TIME UNITS

TOTAL WAGES-IN-KIND 10.00

DATA ENTERED BY

DATA VERIFIED BY

AUTHORIZED SIGNATURE

DATE

CLAIMS PRE AUDIT SUPERVISOR PRE AUDIT BRANCH

DATE

AUDITED BY

TOTAL COST OF LIVING

BALANCED BY CONTROL CLERK

STATE HONOLULU FORM D-94 (REV. 1/89)

EXHIBIT C: SAMPLE OF CORRECTED HOURLY TURNAROUND, SAFORM D-94

STATE OF HAWAII
PAYROLL CHANGE SCHEDULE
TURNAROUND P/R CHANGE SCHEDULE

REGULAR/HOURLY

TURNAROUND FOR: 07/31/89
PAY PERIOD ENDING: July 15, 1989

PAYROLL NO.

EMPLOYEE NUMBER	NAME (LAST, FIRST, MIDDLE) / SOCIAL SECURITY NUMBER	BU	REGULAR STATUTORY DUES	RETRO STATUTORY DUES							POSITION NO.	UNIFORM ACCOUNTING CODE								GROSS AMOUNT	TIME UNITS	RATES			WAGES-IN-KIND OR COLA		REMARKS
007658	AAAA, FIRST M I ~~111-11-9981~~ 573-11-5492		001 M M	03	03	N	N	2	B 531.51 F 100.00	1		G305Z	001	2000						50.00	1.00	H	25.00				
007666	BBBB, FIRST M I 111-11-7487		302 ~~001~~ M M	03	03	N	E	2	B 476.00 F 100.00	1 2	00013	S301Z G305Z	302 ~~001~~ ~~001~~ 302	2000 2000						50.00 50.00	1.00 1.00	H H	25.00 25.00				
007674	CBBB, FIRST M I ~~CCCC, FIRST M I~~ 111-11-9416		001 F S	01	01	N	N 3 ~~1~~		B 753.88 F 100.00	1 2	00055	S301Z G305Z	001 001	2000 2000						75.00 75.00	.50 .50	H H	25.00 25.00				
007682	DDDD, FIRST M I 111-11-6001		001 M ~~H~~ 5	~~01~~ 99	~~01~~ 99	N X	E X	2	B 615.46 F 100.00	1 2	00053	G305Z S301Z	001 001	2000 2000						75.00 75.00	.50 .50	H H	25.00 25.00				
007690	EEEE, FIRST M I 111-11-7384		001 M M	~~01~~ 03	01	N	N	2	B 600.55 F 100.00	1 2	~~00016~~ 00031	G305Z S301Z	001 001	2000 2000						75.00 75.00	.50 .50	H H	25.00 25.00		W	60.00	
007716	FFAA, FIRST M I 111-11-3671		001 M S	01	~~01~~ 05	N	E	2	B 600.00 F 100.00	1 2	00056	S301Z G305Z	001 001	2000 2000						50.00 50.00	99.99 1.00	H H	25.00 25.00	2 1			
007708	FFFF, FIRST M I 111-11-1088		001 M M	00	00	N	N	2	B 482.60 F 100.00	1 2	00015	S301Z G305Z	001 001	2000 2000						75.00 75.00	1.00 4.00	H H	25.00 25.00		C	9.00	
007724	GGGG, FIRST M I 111-11-0896		001 M M	06	06	N ~~1~~	E	2	B 714.00 F 100.00	1 2	00018	S301Z G305Z	001 001	2000 2000						50.00 50.00	999.99 999.99	H H	4.00 ~~25.00~~ ~~25.00~~ 4.00	3 3			

I CERTIFY THAT THE WITHIN PAYROLL, WITH CHANGES AND ADJUSTMENTS AS NOTED, REPRESENTS A TRUE AND LEGAL PAYROLL OF THE DEPARTMENT FOR THE PAY PERIOD ENDING

AUTHORIZED SIGNATURE — DATE

TOTAL OTHER GROSS

APPROVED FOR PAYMENT — CLAIMS PRE AUDIT SUPERVISOR, PRE AUDIT BRANCH — DATE

TOTAL GROSS AMOUNT: 950.00

TOTAL TIME UNITS: 2,111.99

AUDITED BY

TOTAL WAGES IN KIND: 50.00

TOTAL COST OF LIVING: 5.00

DATA ENTERED BY — DATA ENTRY BY — PAYMENT BY CONTROL

EXHIBIT D: SAMPLE OF CORRECTED FRINGE TURNAROUND, SAFORM D-94

STATE OF HAWAII
PAYROLL CHANGE SCHEDULE
TURNAROUND P/R CHANGE SCHEDULE

FRINGE

PAYROLL NO. _____

TURNAROUND FOR: 07/31/89
PAY PERIOD ENDING: July 15, 1989

EMPLOYEE NUMBER	NAME (LAST, FIRST, MIDDLE) / SOCIAL SECURITY NUMBER	BU	REGULAR STATUTORY DUES	RETIRO STATUTORY DUES						B - BASE PAY / F - FTE / OTHER GROSS	LINE NO	POSITION NO	UNIFORM ACCOUNTING CODE: APPRO PRIATION	SUB DIVISION	PROJECT	FUNCTION	LOCATION	PROJECT	EIC CODE	PAY PAR CODE	GROSS AMOUNT	TIME UNITS	RATES: CODE	AMOUNT	WAGES-IN-KIND OR COLA: CODE	AMOUNT	REMARKS
007656	AAAA, FIRST M I 111-11-9981		001	M M	03	03	1	B	2	B 581.51 F 100.00	1		G305Z S305Z	001 001	2000 2000						D N	50.00	8.00 8.00	H H H	25.00 5.00 .30			
007666	BBBB, FIRST M I 111-11-7487		001	M M	03	03	1	A	2	B 476.00 F 100.00	1 2	00013	S301Z G305Z	001 001	2000 2000							50.00 50.00		H H	25.00 25.00			
007674	CCCC, FIRST M I 111-11-9414		001	F S	01	01	1	B	1	B 753.88 F 100.00	1 2	00055	S301Z G305Z	001 001	2000 2000						P T	75.00 75.00	2.00 126.00	H H	~~25.00~~ 3.10 ~~25.00~~ 1.00			
007682	DDDD, FIRST M I 111-11-6001		001	M M	04	04	1	A	2	B 615.46 F 100.00	1 2	00053	G305Z S301Z	001 001	2000 2000							75.00 75.00		H H	25.00 25.00			
007690	EEEE, FIRST M I 111-11-7384		001	M M	01	01	1	A	2	B 600.55 F 100.00	1 2	00016	G305Z S301Z	001 001	2000 2000							75.00 75.00		H H	25.00 25.00			
007716	FFAA, FIRST M I 111-11-3671		001	M S	01	01	1	B	2	B 600.00 F 100.00	1 2	00056	S301Z G305Z	001 001	2000 2000							50.00 50.00		H H	25.00 25.00			
007708	FFFF, FIRST M I 111-11-1008		001	M M	00	00	1	A	2	B 482.60 F 100.00	1 2	00012	S301Z G305Z	001 001	2000 2000							75.00 75.00		H H	25.00 25.00			
007724	GGGG, FIRST M I 111-11-0896		001	M M	06	06	1	A	2	B 714.00 F 100.00	1 2	00018	S301Z G305Z	001 001	2000 2000							50.00 50.00		H H	25.00 25.00			

I CERTIFY THAT THE WITHIN PAYROLL WITH CHANGES AND ADJUSTMENTS AS NOTED REPRESENTS A TRUE AND LEGAL PAYROLL OF THE DEPARTMENT FOR THE PAY PERIOD ENDING _____

AUTHORIZED SIGNATURE _____ DATE _____

TOTAL OTHER GROSS _____

APPROVED FOR PAYMENT _____

CLAIMS PRE AUDIT SUPERVISOR
PRE AUDIT BRANCH _____ DATE _____

TOTAL GROSS AMOUNT 950.00

TOTAL TIME UNITS 144.00

AUDITED BY _____

TOTAL WAGES-IN-KIND _____

TOTAL COST OF LIVING _____

DATA ENTERED BY _____ DATA VERIFIED BY _____

BALANCED BY CONTROL CLERK _____

STATE ACCOUNTING FORM D-94
JULY 1989 REVISED