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| **Multiple Staff Payment Form – Payroll Form P1** |
| Department: |       |
| Contact Name: |       | Month Ending: |       |
| Email Address: |       | Ext. Number: |       |
| **Please refer to the published guidelines.**  **Link to HR Working hours policy -** [**Working Hours**](http://www.strath.ac.uk/media/ps/humanresources/conditionsofemployment/Working_Hours_SoP.pdf) |



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| **Employee’s Name** | **Employee’s Department** | **Reason For Payment** | **Overtime Hours** | **Fee Payment (£)** | **Budget Code to be Charged**(23 character budget code required) |
| **Single****Time** | **Time and a Half** | **Double Time** |
|       |       |       |       |       |       |       |       |
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|  | **Head of Department** | **Human Resources** | **Finance Office** |
| Authorised by: |       |       |       |
| Date Authorised: |       |       |       |