Completing the Payroll Distribution/Retro Request Form (PDRR)

For any prior fiscal year Retros or Cross College Retros, you must complete the PDRR form and have it signed off on by the appropriate Dean/Director Processing Office. If this is a Cross College Retro, both the home and secondary Dean/Director or Dept Head must sign off.

The PDRR form is NOT completed in myUFL. You will access and complete the form from http://www.fa.ufl.edu/forms-and-publications/forms/#payroll


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<tr>
<th>Line Action</th>
<th>Earnings Code</th>
<th>CHARTFIELD Information</th>
<th>Project End Date</th>
<th>Combination Code</th>
<th>Distribution Begin Date</th>
<th>Distribution End Date</th>
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I CONFIRM that this Payroll Distribution Request supersedes any prior Payroll Distribution requests sent for processing.

Home Department
Contact Name: 
Phone: 
Email: 

APPROVED
Dean/Director/Department Head (Signature)

Dean/Director/Department Head (Typed)

Cross College Department
Contact Name: 
Phone: 
Email: 

APPROVED
Dean/Director/Department Head (Signature)

Dean/Director/Department Head (Typed)

CY Cross College will be processed by home dept college or VP area.
PY: If non-grant related - will be processed by the home dept college or VP area
PY: If grant related retro - email form to home dept college or VP area with the cost transfer form.
2. Enter **Date, Employee Name, Employee/UFID Number, Employee Record Number** and **Home Department ID**.

   - **Date** – Enter today’s date
   - **Employee Name** – Enter the employee’s primary name as indicated in Job Data
   - **Employee/UFID Number** – Enter the employee’s 8-digit UFID
   - **Employee Record Number** – The Empl Rcd Number is the number associated with the job in your department
   - **Home Department ID** – On the individual’s Job Data you will also find his or her Home Department. It is labeled Department.

3. If this Retro will affect Closed Effort Period, enter Yes. Otherwise, enter No.

4. If this Retro will affect a grant project, enter Yes. Otherwise, enter No.

   **NOTE:** If affecting a C&G project (201/209 funds), the Cost Transfer Information Form must also be completed. You will see the link directly above the C&G Approval field.
5. Enter the type of Line Action that is occurring. Options are New, No Change, Decrease or Increase.
   NEW – When you are adding charges to a Combination Code that wasn’t in the date range you are editing, the code is NEW to this date range. Select NEW.
   NO CHANGE – For a distribution where a percentage is going to change and a percentage within that date range that will not be changing, select NO CHANGE for the lines that will not be changed. Keep in mind, the distribution must equal 100 percent.
   DECREASE – When you are editing your percentage from say 65% and changing it to 35%, this is a decrease. Specifies a lower percentage value has been entered.
   INCREASE – When you are editing your percentage from say 25% and changing it to 45%, this is an increase. Specifies a greater percentage value has been entered.

6. If this distribution is for an Additional Pay, enter the appropriate Earnings Code in the Earnings Code field.

7. Enter the Home Dept ID, Fund, Project (if needed), Project End Date (if needed), Combination Code, Percentage, Distribution Begin and End date for each required line.

   ![Diagram showing line action options]

<table>
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<tr>
<th>Line Action</th>
<th>Earnings Code</th>
<th>CHARTFIELD Information</th>
<th>Project End Date</th>
<th>Combination Code</th>
<th>Percent</th>
<th>Distribution Begin Date</th>
<th>Distribution End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO CHANGE</td>
<td>99990100</td>
<td>987 ABCD0100</td>
<td>10/15/2016</td>
<td>000054321</td>
<td>20.00</td>
<td>2/12/2015</td>
<td>6/30/2015</td>
</tr>
<tr>
<td>DECREASE</td>
<td>99990100</td>
<td>999 DCBA0140</td>
<td>12/1/2016</td>
<td>000056789</td>
<td>70.00</td>
<td>2/12/2015</td>
<td>6/30/2015</td>
</tr>
<tr>
<td>NEW</td>
<td>99990100</td>
<td>989 BCDA0355</td>
<td>10/15/2016</td>
<td>0082369</td>
<td>10.00</td>
<td>2/12/2015</td>
<td>6/30/2015</td>
</tr>
</tbody>
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   NOTE: All entries must calculate to total of 100%!

8. Enter the Home Department Contact Name, Phone and Email at the bottom of the form.

   Home Department
   Contact Name: Ima Gator
   Phone: 392-1234
   Email: ima_gator@ufl.edu
9. Enter the name of the Home Dean/Director or Dept Head who is signing off on this distribution.

10. If this is a Cross College distribution, enter the name of the secondary Dean/Director or Dept Head who is signing off on this distribution.

11. Save and either print or email the form to the appropriate Dean/Director or Dept Head for signature. Instruct them to send it back to you. Once approved form has returned to you, submit it to the appropriate College Level/VP Area Processing Office.