



City and County of San Francisco

ACTING ASSIGNMENT PAY REQUEST FORM

I. EMPLOYEE INFORMATION

Form I: Employee Information. Includes fields for Name of Employee Assigned, Employee ID Number, Employee Organization, Current Job Code/Title, Current Funding, and various ID numbers (Acct ID, Fund ID, Dept ID, Authority ID, PC Bus Unit, Project ID, Activity ID, Other).

II. ASSIGNMENT INFORMATION (Position to which employee will be assigned)

Form II: Assignment Information. Includes fields for extension status, job code/title, date assignment begins/ends, adjusted salary, vice name, reason for assignment, and funding identification (Budgeted/Non-Budgeted).

III. APPROVALS

Approval box 1: Certifies Assignment meets conditions of applicable MOU provisions and validates description of duties statement. Includes fields for Signature and Date of Appointing Officer or Designee.

Approval box 2: Certification of availability of funds Controller's Budget Office - Fund Accountant Approval. Includes fields for Signature and Date.

DEPARTMENT: Retain copy of this form. It may be submitted to support claims of qualifying experience for DHR examinations.