



University of California Irvine  
Accounting & Fiscal Services  
120 Theory, Suite 200  
Irvine, CA 92697

**University of California, Irvine – Repayment of Employee’s Share of Cost**

I, \_\_\_\_\_, acknowledge a balance of \$\_\_\_\_\_ owed to the Regents of the University of California. This debt is the result of a relocation overpayment from Purchase Order # \_\_\_\_\_.

I will repay the amount owed by agreeing to one of the following options:

**I will write a check for the full amount of \$\_\_\_\_\_.**

Please make the check payable to the University of California Regents, write the employee ID number and the word relocation on the check. Any other information that will help identify the overpayment is welcome to be sent with the check. The check should be delivered to the departmental representative, who in turn will deliver the check to UCI Accounts Payable, 120 Theory, Suite 200, Irvine, CA 92697, Attn: Relocation Officer.

**Set up recurring payroll deductions from your paycheck until overpayment is paid in full (complete repayment must be made no later than \_\_\_\_\_).** Please choose the timeframe you would like the overpayment to be paid out in:

- One Month
- Two Months
- Three Months

*\*An employee must repay The Regents of the University of California for the amount of the employee’s share of cost. Failure to enter into a performing payback arrangement and to adhere to the repayment schedule will result in the remaining overpayment being billed to the employee and referred to the State of California or other agency for collection.\** \_\_\_\_\_

Initial

*\*\*It is imperative that an employee repay their share of the cost in full before December 31<sup>st</sup>. Failure to pay back the full amount by this date could result in employees not to recover the additional tax liability from the previous year, due to strict guidelines provided by the Internal Revenue Service for overpayments.\*\** \_\_\_\_\_

Initial

**Repayment Schedule by Payroll Deduction**

Repayment of the employee's share of cost will be made in accordance with the following schedule by automatic payroll deduction.

| <b>Pay Date:</b> | <b>Amount Due:</b> |
|------------------|--------------------|
|                  |                    |
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|                  |                    |
|                  |                    |
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|                  |                    |
|                  |                    |

**Authorization**

I authorize each and every payroll deduction per the above schedule. Furthermore, should my employment at the University of California, Irvine end prior to the completion of the Repayment Schedule, I authorize the maximum payroll deduction allowed by law to be withheld from my final paycheck to satisfy the remaining balance owed.

\_\_\_\_\_  
Employee Signature/Acknowledgment      Employee ID      Date

\_\_\_\_\_  
Dept. Representative Signature/Approval      Dept. Rep. Printed Name      Date

\*Electronic signature is allowed using DocuSign.

\*Otherwise, please handwrite signature, scan, and email to [travel-accounting@uci.edu](mailto:travel-accounting@uci.edu)