

SUPPLEMENT IFORM

ADDING A SUPPLEMENTAL PAYMENT

Overview: The **Create New Payment** action on the Supplement iForm is used to create a new supplemental payment for a Duke employee. It is used any time a new supplement is established. Keep in mind the following guidance around supplemental payments:

- The supplemental payments and the Supplement iForm only apply to exempt (monthly) employees.
- Supplemental payments should not be paid in advance of the work being performed. IForm cannot be future dated.
- Supplemental payments can be one-time or can be set-up for multiple months.
- The Supplement iForm is available from the Staff tab in iForms and on the Grants Management Tab on the Effort and Payroll Tools and Reports page under Employee Data Search.
- Multiple supplement iForms can be processed simultaneously. Make sure to coordinate payments as appropriate.
- [GAP 101.6, Supplemental Payments to Exempt Employees](#) provides guidance on processing supplemental payments.



Step 1

Enter the **Name** or **DUID** of the employee receiving the supplement and select **Start**. When the employee's information is returned, select **New Forms**. From the **Staff Forms** page, select **Supplemental Pay**.

The screenshot shows the iForms interface. On the left, there is a search form with fields for Personnel No. (00105642), Last Name, and First Name. A red arrow points from the 'Start' button to the 'Personnel No.' field. Below the search form, it says '1 Hits Found'. On the right, there is a table with columns: Pernr, Name, Position, PYA, Pers Subarea, Org Key, Status, IForm, Data Sheet, Detail, Supe Pernr, and Supe Name. A red arrow points from the 'New Forms' link in the 'IForm' column to the 'Staff Forms' panel. The 'Staff Forms' panel shows employee details for KURT COBAIN (DUID: 00105642) and a list of available forms. A red arrow points from the 'Supplemental Pay' option in the list to the right.

Pernr	Name	Position	PYA	Pers Subarea	Org Key	Status	IForm	Data Sheet	Detail	Supe Pernr	Supe Name
00105642	KURT COBAIN	50018422	UM	EXEMPT	DD24	A	New Forms	Print	Detail	00746156	SAMMY DAVIS JR

Questions?

Corporate Payroll Services – via email: payroll@duke.edu or via phone: 919-684-2642

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Step 2

From the Supplemental Payments page, in the Request Data section of the iForm, use the drop down menus to select the **Supplement Action Create New Payment** and the **Reason for Payment** using the drop-down menus.

Supplemental Payments

Header Data

Employee: KURT COBAIN	00105642	Employee Status: Active
Organizational Assignment: Supplement test2	50561017	Payroll Area: MONTHLY UM
Organizational Key: HEART CENTER SBR UM DD24		Job Code: CLINICAL RESEARCH NURSE C 00001203

Request Data

Primary Routing Org Unit 50561017 Supplement test2 (6860504050)

Alternate Routing Org Unit 00000000

Supplement Action:

Reason for Payment:

Select: Supplement Action ✕

Hide Advanced Search Result <= 500 items

Update Reason: Reason Text:

Items (3)

	Update Reason	Reason Text
<input type="radio"/>	1	Update Existing Payment
<input type="radio"/>	2	Create New Payment
<input type="radio"/>	3	End Existing Payment

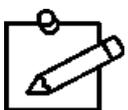
- **Supplement Action** reason “2” creates a new payment.
- Select the most appropriate **Reason for Payment** from the available options.

Hide Advanced Search Result <= 500 items

Reason for Change: Reason Text:

Items (45)

	Change Reason	Reason Text
<input type="radio"/>	01	STANDBY/BEEPER COVERAGE
<input type="radio"/>	02	HONORARIUM
<input type="radio"/>	03	CLINICAL LEAD RESPONSIBILITIES
<input type="radio"/>	04	PEDIATRIC RAPID RESPONSE TEAM
<input type="radio"/>	05	1/9th ANNUAL RATE-SUMMER PYMT
<input type="radio"/>	06	INCENTIVE PAYMENT
<input type="radio"/>	07	DICTIONATION OF DISCHARGE SUMMARY
<input type="radio"/>	08	DUTY BEYOND ROUTINE JOB DUTY
<input type="radio"/>	09	TUTORING
<input type="radio"/>	10	MUSICAL PERFORMANCES
<input type="radio"/>	11	RESEARCH WORK - SPECIAL PROJ.
<input type="radio"/>	12	ADMIN SUPP FOR FIELD EDUCATION



Please note: Additional information may be required based upon the Reason for Payment.

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SUPPLEMENT I FORM

ADDING A SUPPLEMENTAL PAYMENT

Step 3

Enter information about the supplement.

Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
<input type="radio"/> ⓘ No records found															
Start Month: <input type="text" value="A."/>	End Month: <input type="text" value="C."/>														
Number of Payments: <input type="text" value="B."/>															
Service Start Date: <input type="text" value="D."/>	Service End Date: <input type="text" value="D."/>														
Company: <input type="text" value="E."/>	Cost Center: <input type="text" value="F."/>	WBS: <input type="text" value="F."/>	Cost Object Description: <input type="text" value="F."/>												
Service Type: 60	Service Category: <input type="text" value="G."/>														
Amount: <input style="border: 1px solid black;" type="text" value="0.00"/>															
<input type="button" value="Add"/> <input type="button" value="Edit"/> <input type="button" value="Delete"/> <input type="button" value="Clear Fields"/>															

- A. Start Month:** Month when supplement begins (recurring) or month when supplement is issued (one-time).
- B. Number of Payments:** Number of months the payment will be issued. Enter “1” for a one-time payment.
- C. End Month:** Last month the payment will be issued. Auto-populates based on the Start Month and the Number of Payments.
- D. Service Start/End Date:** Provides detail on when the activity supporting the payment occurred.
- E. Company:** Company Code of the entity responsible for the funding source.
- F. Cost Center/WBS Element/Cost Object Description:** The Duke cost object to which the supplement will be expensed. Cost object description is the text associated with the cost object number.
- G. Service Type/Service Category:** The Duke general ledger account associated with the payment. The Service Type is always 60. Users will select the Service Category from the drop-down. Drop-down options will vary based upon the position.



Please note: Service Category is not required for health system positions.

- H. Amount:** Monthly amount of the supplemental payment.

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Step 4

Once information is entered about the supplement, select **Add**. The supplement payment displays in the **Supplements** grid.

Request Data

Primary Routing Org Unit: 50561017 Supplement test2 (6860504050)
 Alternate Routing Org Unit: 00000000
 Supplement Action: 2 Create New Payment
 Reason for Payment: 28 MOBILE DEVICE

Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
No records found															

Start Month: MAY-2022 End Month:
 Number of Payments: 5
 Service Start Date: 04/28/2022 Service End Date: 09/30/2022
 Company: 0010 Cost Center: 1573205 WBS: Cost Object Description: OFC OF EDUC FOR RESEARCH ADMIN & FINANCE
 Service Type: 60 Service Category: 00
 Amount: 75.00

Add **Edit** **Delete** **Clear Fields**

Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
MAY-2022	SEP-2022	5	04/28/2022	09/30/2022	0010	1573205		OFC OF EDUC FOR RESEARCH ADMIN & FINANCE	60	00	75.00		A	28	MOBILE DEVICE

Start Month: End Month:
 Number of Payments:
 Service Start Date: Service End Date:
 Company: Cost Center: WBS: Cost Object Description:
 Service Type: 60 Service Category:
 Amount: 0.00

Add **Edit** **Delete** **Clear Fields**

Step 5

Using the free text field, provide the **Supplemental Detail** to describe the payment. This field is required and subject to internal and external audit. Add **Attachments** to support the payment as necessary. Do not include any personal or protected information.

Supplemental Detail

Mobile device payment as personal cell phone is required to be used during work day.

Attachments

No file chosen

Attached Documents

<input type="radio"/>	<input type="text"/>
<input type="radio"/>	<input type="text"/>

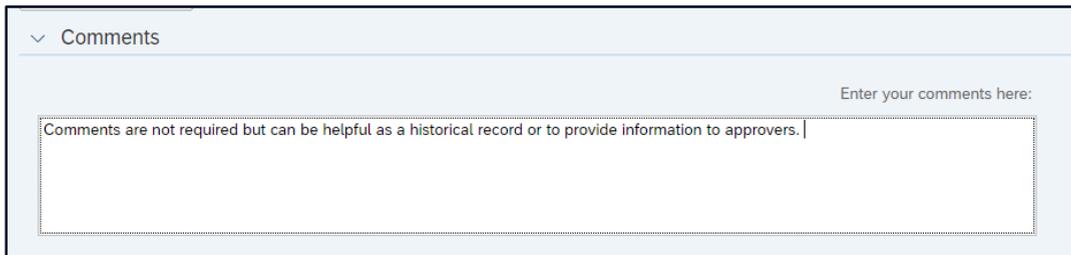
Questions?

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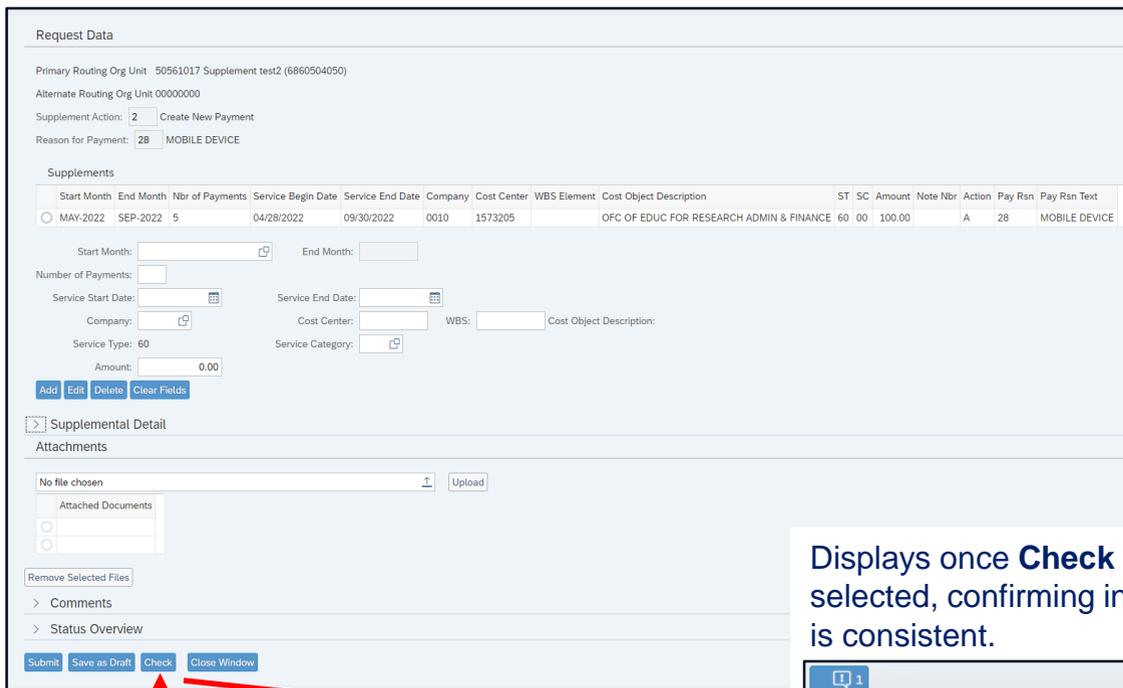
Step 6

Provide **Comments** as appropriate to assist with approval or to serve as a reference for others who may look at the payments. Comments are not required. Please remember that comments become part of the permanent SAP record. Ensure comments do not include any personal or protected information.



Step 7

Select **Check** to validate that information contained in the iForm is consistent and to trigger error or warning messages.



Request Data

Primary Routing Org Unit: 50561017 Supplement test2 (6860504050)
Alternate Routing Org Unit: 00000000
Supplement Action: 2 Create New Payment
Reason for Payment: 28 MOBILE DEVICE

Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
MAY-2022	SEP-2022	5	04/28/2022	09/30/2022	0010	1573205		OFC OF EDUC FOR RESEARCH ADMIN & FINANCE	60	00	100.00		A	28	MOBILE DEVICE

Start Month: [] End Month: []
Number of Payments: []
Service Start Date: [] Service End Date: []
Company: [] Cost Center: [] WBS: [] Cost Object Description: []
Service Type: 60 Service Category: []
Amount: 0.00

Add Edit Delete Clear Fields

Supplemental Detail

Attachments

No file chosen [] Upload

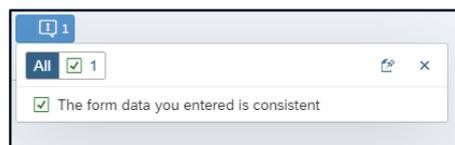
Attached Documents

Remove Selected Files

> Comments
> Status Overview

Submit Save as Draft **Check** Close Window

Displays once **Check** is selected, confirming information is consistent.



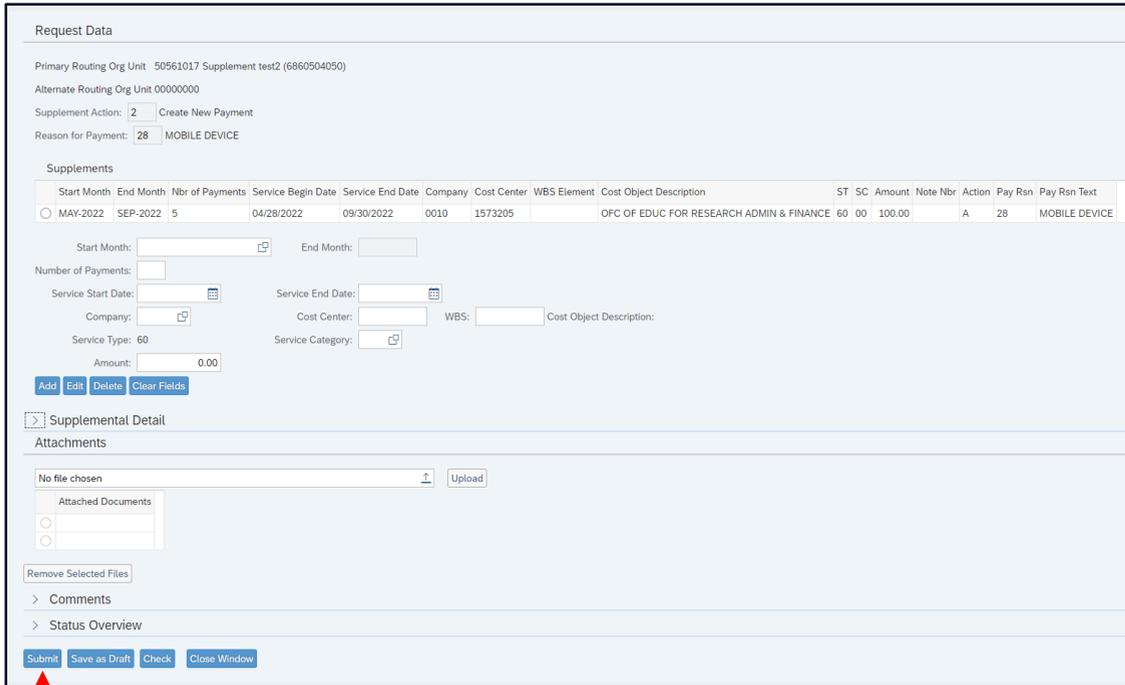
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Step 8

Once data is confirmed, select **Submit** to send the iForm through your business unit's approval process.



Displays once **Submit** is selected and iForm enters the approval workflow.

Questions?

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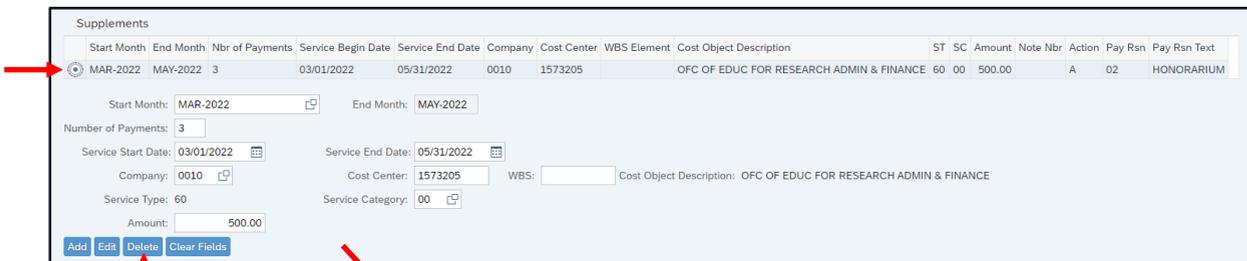
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Additional Guidance

When creating a new supplemental payment, additional action buttons are available and may be helpful when establishing a payment.

If users add new payment information in error and need to erase the line, select the radio button beside the line to be removed and select **Delete**.



Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
<input checked="" type="radio"/>	MAR-2022	MAY-2022	3	03/01/2022	05/31/2022	0010	1573205	OFC OF EDUC FOR RESEARCH ADMIN & FINANCE	60	00	500.00		A	02	HONORARIUM

Start Month: End Month:

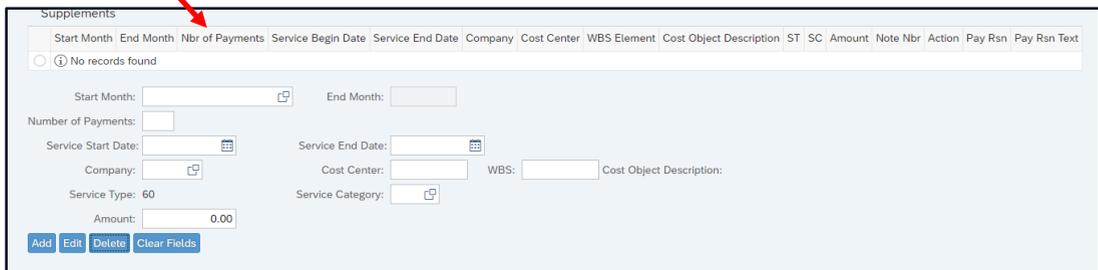
Number of Payments:

Service Start Date: Service End Date:

Company: Cost Center: WBS: Cost Object Description:

Service Type: Service Category:

Amount:



Supplements

No records found

Start Month: End Month:

Number of Payments:

Service Start Date: Service End Date:

Company: Cost Center: WBS: Cost Object Description:

Service Type: Service Category:

Amount:

If users add new payment information and want to edit information once it is added to the grid, select the line and update the information in the data fields as appropriate. Select **Edit** to update the line in the grid.



Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
<input checked="" type="radio"/>	MAR-2022	MAY-2022	3	03/01/2022	05/31/2022	0010	1573205	OFC OF EDUC FOR RESEARCH ADMIN & FINANCE	60	00	500.00		A	02	HONORARIUM

Start Month: End Month:

Number of Payments:

Service Start Date: Service End Date:

Company: Cost Center: WBS: Cost Object Description:

Service Type: Service Category:

Amount:



Supplements

Start Month	End Month	Nbr of Payments	Service Begin Date	Service End Date	Company	Cost Center	WBS Element	Cost Object Description	ST	SC	Amount	Note Nbr	Action	Pay Rsn	Pay Rsn Text
<input checked="" type="radio"/>	MAR-2022	APR-2022	2	03/01/2022	04/30/2022	0010	1573205	OFC OF EDUC FOR RESEARCH ADMIN & FINANCE	60	00	500.00		A	02	HONORARIUM

Start Month: End Month:

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