

Multiple Employee Stipend Certification Form
(Blanket Certification)

Supervisor:

Title:

Reporting Period:

This is to certify that the following individuals¹ have participated in an extra pay assignment and spent 100% of their extra duty time on:

These individuals were paid a stipend out of:

| Position: | Printed Name: |
|-----------|---------------|
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| | |

(Supervisor Signature)

(Date)
