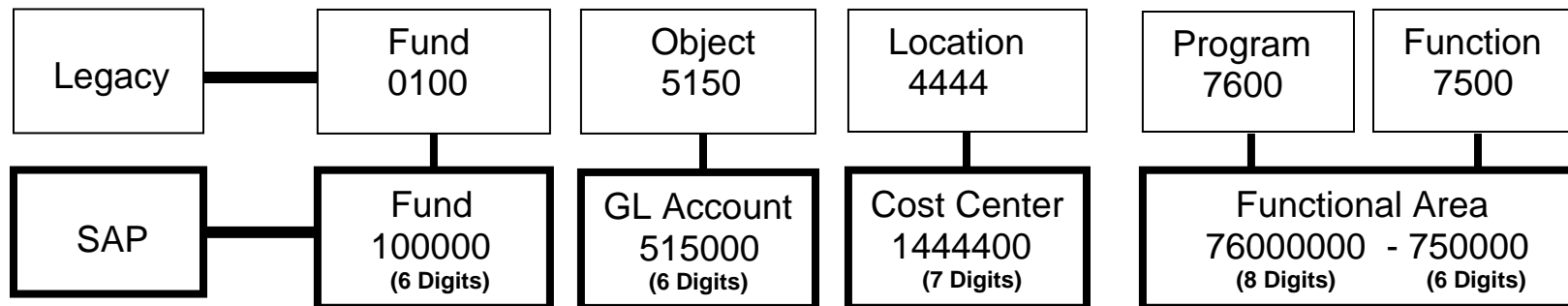# Translation of Legacy Structures to SAP Structures

This is only an example.

Please note that each location must use their own Fund, GL Account, Cost Center and Functional Area information.

Legacy		Fund 0100	Object 5150	Location 4444	Program 7600	Function 7500
SAP		**Fund** 100000 **(6 Digits)**	**GL Account** 515000 **(6 Digits)**	**Cost Center** 1444400 **(7 Digits)**	**Functional Area** 76000000 **(8 Digits)**	- 750000 **(6 Digits)**

MIAMI-DADE COUNTY PUBLIC SCHOOLS
OVERTIME APPROVAL FOR
ALTERNATE ASSIGNMENT

NOTE: This form is due in the "Prime Cost Center" by 9:00 A.M. on "payroll due date" (see Payroll Processing Schedule). Overtime hours must be entered no later than 2:00 P.M. on the "payroll due date". A separate form per employee per pay period must be prepared.

DATE: _____

EMPLOYEE NAME: _____ PERS ASSIG NO.: _____ PRIME COST CENTER _____

OVERTIME COST CENTER NAME: _____ OVERTIME COST CENTER NO.: _____

CHARGE COST CENTER	FUND	FUNCTIONAL AREA

SAP PERIOD#

PAY PERIOD BEGIN DATE

MONTH	DAY	YEAR

	FRI		SAT		SUN		MON		TUES		WED		THUR	TOTAL (Do **NOT** include non-paid lunch)
WEEK 1	IN		IN		IN		IN		IN		IN		IN	
	OUT		OUT		OUT		OUT		OUT		OUT		OUT	
WEEK 2	IN		IN		IN		IN		IN		IN		IN	
	OUT		OUT		OUT		OUT		OUT		OUT		OUT	

Verified, Approved and Certified By: Verified, Approved and Certified By:

_____   _____
Supervisor of **Charge** Cost Center (Typed)   Supervisor of **Prime** Cost Center (Typed)

_____   _____
Signature   Signature

_____   _____
Title   Date   Title   Date

FM-6796 Rev. (04-14)