

Section A:  
To be supplied by the **Commands** (e.g., timesheets, leave slips)

Sample # C-S1- \_\_\_\_\_

**Directions:** For each sample item:

1. Provide the following supporting documentation requested below, as it relates to each sample selected.
2. Place a checkmark to confirm the requested documentation is included in this submission.
3. Please be sure to number all documents provided as indicated below (**A1, A2, etc.**).
4. If the requested document is not available, kindly attach a Memorandum for Record (MFR) explaining the reason why.
5. Any Personally Identifiable Information (PII) **must be redacted** prior to submitting to us; otherwise we cannot accept the document. The first 5 digits of an employee's Social Security Number must be redacted; do not redact the name or DOB.

**A. Time and Attendance Documentation**

- A1**  Certified electronic timesheet from Automated Time Attendance & Production System (ATAAPS) time and attendance for the selected pay period, including all adjustments if applicable. Explain any differences between electronic timesheet and manual timesheet (if applicable). Verify that the pay period per the timesheet provided agrees to the Date Period column in the sample. Please provide the timesheet certified by the employee and supervisor for the pay period selected.
- A2**  Certification screenshot from ATAAPS that shows the name of the Certifier/Approver of the timesheet (e.g., in ATAAPS the "Administration: Certify Window") for the pay period selected.
- A3**  ATAAPS User Role Form or screen shot with the User Role for the Certifier/Approver of the timesheet for the selected sample (all assigned roles must be visible on the documentation).
- A4**  Certified manual timesheet for the selected pay period, including all adjustments if applicable. Explain any differences between electronic timesheet and manual timesheet (if applicable). Verify that the pay period per the timesheet provided agrees to the Date Period column in the sample. Please provide the timesheet certified by the employee and supervisor for the pay period selected.
- A5**  For manual timesheets only, a screen shot of the timesheet entered in DCPS for the pay period selected. The screenshot should contain the name of the Timekeeper that entered the timesheet.
- A6**  DD2875 System Authorization Access Request form for the Timekeeper that entered the timesheet for the selected sample (all assigned roles must be visible on the documentation).
- A7**  For every sample, provide the leave slips, overtime authorizations, sign-in sheets or other supporting documentation to support the leave and premium pay on the timesheet of the selected sample.



B. DCPS Information

Section B:  
To be supplied by DFAS (e.g., Master Pay History Report)

- B1  Master Pay History Report (MPHR) and/or Leave and Earnings Statement (LES) from DCPS for the employee pertaining to the pay period selected. Please provide all pages of the report. If the MPHR indicates that a cash award was paid during the pay period selected please provide the related SF-50, SF-52, and RPA tracker.
- B2  Master Leave History I Report (page 1 only) from DCPS for the employee pertaining to the pay period selected.
- B3  Entitlements – If the Master Pay History Report reflects payment of a foreign entitlement indicated by codes such as “YR” (danger pay), please include the Entitlements (excluding LQA) screen from DCPS that covers the applicable (selected) sample pay period. Note: There may be more than one for a pay period.
- B4  Master Pay Time History Report (MTHR) showing the employee’s hours worked in DCPS for the pay period selected.

C. Personnel Documentation

Section C  
To be supplied by CHRA

- C1  SF-50 - Notification of Personnel Action (NPA) that reflects the change in pay that matches the salary that is being paid for the sample period. It must be provided for every sample regardless of the type of transaction. Note: This must be an SF-50 reflects the increase/decrease to this salary (different salary on left side compared to the right side). The salary on the right side must be the salary for the sample period.
- C2  SF-50 – If the selected sample includes a cash award disbursement, include the cash award SF-50. This is in addition to the NPA requested in box C1.
- C3  Request for Personnel Action (RPA) (SF-52) and RPA Tracker -- This will be applicable for any SF-50 provided in C1 and C2 above, other than an automatic salary increase. Therefore if the SF-50 provided shows a "Nature of Action" for anything other than a "gen adjustment" or "reg perf pay", please provide the related RPA tracker and verify that the effective date on the RPA Tracker covers the correct pay period for the selected transaction. Please ensure that the pages showing all signatures/approvals are included.
- C4  Benefit Documentation- Including the Health Benefits Election Form (SF-2809), Life Insurance Election Form (SF-2817), Thrift Savings Plan Election Form (TSP-1), FERS Election of Coverage (SF-3109), CSRS Application to Make Voluntary Contributions (SF2804) and others to support benefit payments made by the employee and on behalf of the employee. Please ensure that the forms are the most recent documents and support the amount on the MPHR.
  - Health Benefits From (SF-2809) is not available because employee did not elect health coverage.
  - Life Insurance Election Form (SF-2817) is not available because employee was automatically enrolled in Basic Only life insurance and did not elect to have additional optional coverage.
  - Thrift Savings Plans Election Form (TSP-1) is not available because employee was automatically enrolled with standard deduction.

U.S. Property of DoD – For Official Use Only

D. Other

Section D:  
An explanation if the required document could not be provided

- D1  Any additional documentation not listed above to support the collection amount, quantity, unit price, etc.

If you need to provide explanation of any supporting documents, please attach in a memo or use the space below.

---



---



---



---

If any of the documents from the checklist above cannot be provided, please attach an explanation or use the space below to explain why the documents could not be provided.

---



---



---



---

Any questions regarding this sample and/or the checklist items provided should be directed to:

Name: OASA(FM&C) Audit Infrastructure Team

Email: usarmy.pentagon.hqda-asa-fm.mbx.sba-audit-requests@mail.mil

U.S. Property of DoD – For Official Use Only