

72nd Comptroller Squadron

To rapidly deliver sustainable financial support to meet the needs of the war fighters; anytime...anywhere



New Hire Orientation

72 CPTS



U.S. AIR FORCE



Civilian Pay Info



- **Location: Building 1, Door 8**
- **Contact Info: 72cpts.fmf.civilianpay@us.af.mil**
- **Phone: 736-5419 (0830-1530)**
- **Customer Service Hours: 0830-1530 M – F**
- **SharePoint Site:**
<https://org2.eis.af.mil/sites/22275/civilian%20pay/forms/allitems.aspx>

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Transfer or Returning



- **Transfers from another Agency/Base or Returning to Government Service:**
 - **Transfer: Provide a copy of your very last LES to input Annual/Sick Leave Balances**
 - **Restart TSP Loan – Complete in the GRB Platform**
 - GRB Platform: <https://gum-crm.csd.disa.mil/app/login>
 - Thrift Line 1-877-968-3778
 - **Civilian PCS Orders: Contact Customer Service 739-5189**
Travel Pay for appointment for travel voucher
 - **Returning: Provide copy of very last LES to input Sick Leave Balance; if you do not have copy contact OPF to get copy of SF1150 from Personnel Folder**

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Military Spouses



- **Military Spouses Residency Relief Act (MSRRA)** - As long as Oklahoma is not your legal residence or domicile and you meet the conditions set forth in the Military Spouses Residency Relief Act (MSRRA) and the Oklahoma form OW-O-MSE, you may not be required to pay Oklahoma state tax
 - **Required documents :**
 - W4
 - MSRRA Letter
 - Form OW-9-MSE Oklahoma Tax Commission Annual Withholding Tax Exemption Certification
 - Military Spouse's PCS Orders
 - Your Military ID Card (Front and Back)
 - Return documents to: 72CPTS/FMF (Civilian Pay Office)

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MyPay Account



- MyPay Account: (<https://mypay.dfas.mil/mypay.aspx>)
 - View Leave and Earning Statement (LES)
 - Update Home Address
 - Update W4
 - Update Direct Deposit
 - Add/Change Allotment
 - Print W2
- MyPay account takes approximately 8 weeks to create

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Important Dates



■ The following dates are scheduled Family Days and or Base Closer Days

- ❖ 29 Nov 19 in conjunction with Thanksgiving Day on 28 Nov 19 (**Shutdown**)
- ❖ 24 Dec 19 in conjunction with Christmas Day on 25 Dec 19 (Liberal Leave)
- ❖ 31 Dec 19, in conjunction with New Year's Day on 1 Jan 20 (Liberal Leave)
- ❖ 14 Feb 20, in conjunction with President's Day on Monday 17 Feb 20
- ❖ 22 May 20, in conjunction with Memorial Day on Monday, 25 May 20
- ❖ 6 Jul 20, in conjunction with Independence Day, observed on Friday, 3 Jul
- ❖ 4 Sep 20, in conjunction with Labor Day on Monday, 7 Sep 20 Friday, 27
- ❖ Nov 20, in conjunction with Thanksgiving Day on Thursday, 26 Nov 20
- ❖ 24 Dec 20, in conjunction with Christmas Day on Friday, 25 Dec 20
- ❖ 31 Dec 20, in conjunction with New Year's Day on Friday, 1 Jan 21

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Important Numbers



- **Total Force Service Center HelpDesk-1-800-525-0102**
 - **GRB Platform: <https://gum-crm.csd.disa.mil/app/login>**
 - **Health/Life Insurance, TSP Updates, Retirement**
- **MyPers – Service Comp Dates**
- **Human Resources – Promotions/Step Increases**

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Guard/Reserve



- **Member(s) of Guard or Reserve need to complete AF Form 3598 and turn in to Personnel Office, Bldg 3001 Door E**
- **Military Orders – you are authorized 120 hours of Leave Military (LM) per year**
 - **You must turn in orders to Supervisor prior to going on Military Leave**
 - **You must turn in Certified Orders to 72CPTS upon completion of Military Duty**

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Military Buy Back



- **If you served in the military and now hold a civilian position, your military service time may apply toward your civil service retirement**

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W4 & Direct Deposit Forms



FASTSTART DIRECT DEPOSIT

INSTRUCTIONS FOR PROCESSING FEDERAL EMPLOYEE PAYMENTS
Use: For processing Federal employee net salary, allotments, and other agency - approved payments associated with Federal employment (i.e. travel reimbursement, uniform allowance, etc). Employee must complete items 1, 2, 3 and 5. Complete item 4 only if you want to start, cancel or change the amount of a savings or discretionary allotment - see instructions on back of form.

Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records.

Form W-4 Employee's Withholding Allowance Certificate
Department of the Treasury Internal Revenue Service
OMB No. 1545-0074
2018

Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

1 Your first name and middle initial
John Doe

Last name
Doe

2 Your social security number
999 99 9999

Home address (number and street or rural route)
124 N. Doe St
City or town, state, and ZIP code
Okla City, Ok 11111

3 Single Married Married, but withhold at higher Single rate.
Note: If married filing separately, check "Married, but withhold at higher Single rate."

4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card.

5 Total number of allowances you're claiming (from the applicable worksheet on the following page)
5 0-10

6 Additional amount, if any, you want withheld from each paycheck
6 \$ 0

7 I claim exemption from withholding for 2018, and I certify that I meet both of the following conditions for exemption.
• Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and
• This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.
If you meet both conditions, write "Exempt" here. **7**

Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(This form is not valid unless you sign it.) ▶

Manual Signature & Date

8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.)
Defense Finance & ACTG Serv Rm 1907, 1240 E 9th Street (CP1), Cleveland OH 44199

9 First date of employment

10 Employer identification number (EIN)
31-1575142

For Privacy Act and Paperwork Reduction Act Notice, see page 4. Cat. No. 10220Q Form W-4 (2018)

1. EMPLOYEE INFORMATION
(SSN) EMPLOYEE PAYROLL IDENTIFICATION NUMBER [] ←

EMPLOYEE NAME (as on payroll records) [] ←
(Last, First, Initials)

TELEPHONE NUMBER (WORK) [] (HOME) [] (CELL) [] ←

2. TYPE OF ACCOUNT
 Checking Savings
Check One

3. DIRECT DEPOSIT ACCOUNT INFORMATION - NET PAY/TRAVEL/OTHER (Use Sec. 4 for allotments)
A voided personal check/sharedraft may be attached in lieu of completing this section. See instructions on back of this form.

ROUTING TRANSIT NUMBER [] 9th digit goes here. ←
Check Digit

ACCOUNT NUMBER [] ←

ACCOUNT TITLE [] ←
(Account Holder's Name)

FINANCIAL INSTITUTION NAME [] ←

4. ALLOTMENT INFORMATION
Complete this section only if you want to start, cancel or change the amount of a savings or discretionary allotment - see instructions on back of form.

TYPE OF ALLOTMENT (Check One)	TYPE OF ACCOUNT (Check One)	ACTION (Check One)	AMOUNT (Check One)
<input type="checkbox"/> Savings (whole dollar amounts only)	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> START	<input type="checkbox"/> INCREASE TO:
<input type="checkbox"/> Discretionary or Third Party	<input type="checkbox"/> CHECKING	<input type="checkbox"/> CANCEL	<input type="checkbox"/> DECREASE TO:
		<input type="checkbox"/> CHANGE	New Total \$ []

ALLOTTEE NAME (person/company who will receive allotment) []

ALLOTTEE'S ROUTING NUMBER [] Check Digit []

ALLOTTEE'S ACCOUNT NUMBER []

ALLOTTEE'S ACCOUNT TITLE []
(Account Holder's Name)

FINANCIAL INSTITUTION NAME []

5. AUTHORIZATION
 I authorize my employer to deposit my pay by direct deposit.
* EMPLOYEE'S SIGNATURE [] ← DATE [] ←

9 digits on

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