RE: **RECOVERY PLAN FOR OVERPAYMENT OF LEAVE INTEGRATED WITH** DISABILITY PAYMENT(S)

Your leave integration for dates along with the gross Short Term Disability exceeded 100% of your base salary. The overpayment amount of \$______ is now due and payable to the County of San Bernardino. hours of previous leave used will be returned when the overpayment is satisfied.

According to the Consolidated Memorandum of Understanding (MOU), the maximum amount an employee receives from integrating leave time with disability payments shall not exceed 100% of the employee's base salary. Per the MOU, "The employee shall be obligated to repay, by payroll recovery, the amount of overpayment within the time frame the overpayment was received by the employee."

You have two options to make this payment:

- 1. Submit a personal check or money order in the amount of **\$** ____ payable to: County of San Bernardino, Central Payroll 4th Floor, 268 W Hospitality Lane; San Bernardino, CA 92415-0032. Please submit this letter along with your payment within 15 calendar days of this letter.
- 2. If we do not receive payment by this deadline the recovery will be taken against your future earnings. If sufficient funds are available the recovery plan will be taken as indicated below:
 - a. Pay period amount of \$_____will be recovered on pay date of
will be recovered on pay date of
amount of \$_____amount of \$_____will be recovered on pay date of
will be recovered on pay date of
 - c. Pay period

If you terminate your employment with the County of San Bernardino during this recovery process, please be advised that we will attempt to take the balance against your final check. Any remaining balance will be forwarded to Central Collections for payment arrangements.

For questions regarding this letter or alternative payment plan, please contact your payroll . For questions regarding repayment by personal check, please specialist at () contact Central Payroll at (909) 382-3154.

Sincerely,