



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS
P.O. Box 41100 • Olympia, Washington 98504-1100

Date of Notice: 2/14/2024

Preston Reece
6440 Lynch Rd. SE
Shelton, WA 98584

Notice of Overpayment

The overpayment team is committed to providing you with the support you need to make the best decision possible through a respectful, clear, and transparent process. If you do not understand the information provided to you or the options available to you, please email the overpayment unit at docoverpayment@doc1.wa.gov.

Dear Preston,

This is to notify you of an overpayment of wages between the pay periods of January 1, 2023, and July 31, 2023. The overpayment is due to late reporting of absences for which you had inadequate accrued paid leave resulting in leave without pay. Furthermore, a portion of the time frame encompassed is under investigation by the Washington State Auditor's Office ("Auditor"). The Auditor has not fully investigated this loss and reserves the right to conduct further investigation into this matter.

The gross amount of the wage overpayment is: **\$10,229.26**

This wage overpayment amount does not include Auditor's investigation costs for which you [Preston Reece] will reimburse the Department of Corrections if further work is performed by the Auditor; or such other amount determined by the Auditor to be the total amount of the loss, plus the full amount of the Auditor's cost for investigation, if any.

This wage overpayment occurred in a prior calendar year and over fourteen (14) pay periods. If repaid in full no later than December 31st, 2026 we can refund you the amount of Social Security and a Medicare tax associated with the gross overpayment which is \$782.53. Because the department is issuing the refund, you may not claim a credit for these amounts from the IRS.

"Working Together for SAFER Communities"

Additionally, we would refund the amount you paid in retirement contributions associated with the gross overpayment which is \$511.46.

Overpayment Details

Pay Period Dates		LWOP HRS	Gross Overpayment
01/01/23	01/15/23	36.0	\$ 1,404.87
01/16/23	01/31/23	40.0	\$ 946.04
02/01/23	02/15/23	44.0	\$ 1,135.25
02/16/23	02/28/23	20.0	\$ 630.69
03/01/23	03/15/23	40.0	\$ 1,167.49
03/16/23	03/31/23	48.0	\$ 1,241.69
04/01/23	04/15/23	40.0	\$ 1,135.25
04/16/23	04/30/23	28.0	\$ 814.80
05/01/23	05/15/23	12.0	\$ 317.46
05/16/23	05/31/23	12.0	\$ 291.01
06/01/23	06/15/23	15.0	\$ 396.82
06/16/23	06/30/23	15.0	\$ 396.81
07/01/23	07/15/23	6.0	\$ 183.90
07/16/23	07/31/23	6.0	\$ 167.18
Total Gross Overpayment		\$	10,229.26

See Teamster Local 117 Articles 9 and 32.22

You must do one of the following within 21 days after the date you receive this notice:

1. Agree to voluntarily repay the Department of Corrections \$10,229.26 (see voluntary repayment schedule options on next page) or,
2. Contact your union representative to file a grievance.

Failure to do one of the above will result in involuntary repayments over fourteen (14) pay periods.

Voluntary Repayment Schedule Options

____ One (1) payment of \$10,229.26.

____ Fourteen (14) payments of \$730.67.

____ *Other amount as mutually agreed upon: \$_____ for ____ payments.

*To discuss another amount please send an email to DOCOverpayments@doc1.wa.gov and provide a daytime phone number to reach you. Someone from the overpayment unit will call you to discuss.

Any rounding adjustments will be made on the final payment to ensure the full amount is collected.

Any amount still outstanding upon separation will be deducted, to the extent possible, from your final pay. Any debt remaining after separation, is your responsibility to reach out to the Department of Corrections overpayment unit and set up a repayment plan. If payments fall behind 30 days or more the debt may be turned over to a debt collection agency.

By my signature I acknowledge and understand the statements and facts outlined in this notice and agree to the voluntary repayment schedule I selected above.

20125049 | 3101

Signature

Date

Return signed agreement to the DOC Overpayment Unit
PO BOX 41145, OLYMPIA WA 98504-1145 | Campus Mail at Mail Stop 41145
Fax to (360) 586-6006 | Email to docoverpayment@doc1.wa.gov