



Pay Date: _____

Pay Period: _____

Payroll Transmittal Changes

Employee ID	Name	Effective Date	Payrule on Effective Date	Hrs per day On Effective Date	Prior Hrs per day (if changing)	Check Reason						Term	Other
						New Hire	FT to PT	PT to FT	Transfer				
									From	To			

Department: _____

Submitted By: _____