

## **PAYROLL NOTIFICATION FORM**

Employee Name:	Branch:	Supervisor:	Pay Per	iod:
Nacation Pay: ALL or Specify  Dates of vacation (if taking time off):			Date of Return	
2. Position Change effective date:	P	revious Position	New Position	ı
3. Rate/Salary Change effective date	:			
Old Truck Rate New Truck Rate		e te	Old Salary/m New Salary/m	
4. Transfer effective date:	P	revious branch	New Branch _	
5. Deduction from Pay (please attach supporting back up):				
Amount Explana	tion			
6. Change of Address/Banking information:				
New Address/Banking Info (if banking, please attach VOID cheque)				
7. Employee Exit: Last day worked _				
Reason for leaving (circle) – Resign	nation Shortage o	of Work Appre	enticeship Leave of Absence	Dismissal
Company Equipment Returned (circle	e) – Coveralls F	uel cards Keys	Cell phone/charger Other	
Instructions for cell phone (i.e. forward phone?/put number on vacation?):				
8. Other:				
Employee Signature: Date:				
Branch Manager approval (if require	d):		Date:	
Operations/Department Manager ap	proval (if required):		Date:	