Change of Labor Distribution Form



Date:						Department of Chemis
Employ	yee Name:					
Employ	yee ID:					
<u>Payroll Di</u>	istribution Chang	<u>e:</u>	Effective fro	om:	to:	
	Current Payroll Distribution			New Pay	ayroll Distribution	
	Percentage of Effort	Account	_	Percentage of Effort	Account	
			Ĺ			
<u>Explanat</u>	ion for Payroll Ch	ange				
estimat	te of effort on	rt shown by the r the current resea have firsthand k	arch and proj	ect goals fo	or the accour	nts requested.
PI Signat	cure					
					Printed Name	
		Business Office Use				
A	ccounting Signature					
Payroll Signature			Date Change	ed ed		