

PRIORITY BUILDING SERVICES, LLC.

PAYROLL/STATUS CHANGE NOTICE

Employee Name:		S.S.#:	
Company Name: <i>Priority Building Services, LLC</i>		EE#	Today's Date:
Effective date of change:	Payroll Change: Yes <input type="checkbox"/> No <input type="checkbox"/>	Status Change: Yes <input type="checkbox"/> No <input type="checkbox"/>	
CHANGE(S) FOR CURRENT EMPLOYEE			
<i>TYPE</i>	<i>FROM</i>	<i>TO</i>	
<input type="checkbox"/> Address			
<input type="checkbox"/> Salary/Wage			
<input type="checkbox"/> Stop DD			
<input type="checkbox"/> W-4			
<input type="checkbox"/> Demotion			
<input type="checkbox"/> Promotion			
<input type="checkbox"/> Job Title			
<input type="checkbox"/> Department			
<input type="checkbox"/> Rehire			
<input type="checkbox"/> Merit Increase			
<input type="checkbox"/> Transfer			
<input type="checkbox"/> Other			
LEAVE OF ABSENCE			
Begin Date:		Return Date:	
<input type="checkbox"/> Educational	<input type="checkbox"/> Personal	<input type="checkbox"/> Family/Medical /Pregnancy Leave	<input type="checkbox"/>
Short-Term Disability			
<input type="checkbox"/> Long-Term Disability	<input type="checkbox"/> Other:		
SEPARATION			
Separation Date:		Last Day Worked:	
Paid:		Last Day	
<input type="checkbox"/> Voluntary	<input type="checkbox"/> Involuntary	Election of Cobra <input type="checkbox"/> Yes <input type="checkbox"/> No	Start date of coverage:
Additional Comments:			

Area Manager Signature

Date