

Prisma Health-Upstate: LABOR TRANSFER FORM

***** PERMANENT LABOR TRANSFER *****

This will process EVERY pay period through the last pay period of the fiscal year unless you notify payroll via email to stop it.

Prepared by:			
** Note: Preparer must be Business Analyst or Manager			
Phone:		Today's Date:	

Please E-MAIL to:
payroll@prismahealth.org

Please notify receiving department of labor transfer

(5 DIGIT) Team member ID NUMBER	TEAM MEMBER NAME	AMT CD	HOURS TO TRANSFER	TRANSFERRING FROM Company - Facility - Dept - Salary Account	TRANSFERRING TO Company - Facility - Dept - Salary Account
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If you have any questions call the Payroll Helpline at 864-797-7PAY (7729) or e-mail payroll@prismahealth.org.