## **Diocese of Covington**

## Payroll Office

## Delete / Transfer notice

					-	
Parish/Scho	ool/Institution					
Employee Name						
Employee File Number						
Last Day W	orked	month For non-reti	day urning teacher	year s who comp	leted their contract,	
			-	-	y of their contract.	
Final Pay				15th		30th
		If you are u	onth nsure of either Office at 859-3		month e dates, please contact	
Reason the employee is being removed from the payroll at this location (check one):						
-	Terminating emplo	oyment				
	• •	ange to (mu	st check one)	:		
		Deceased				
Laid Off						
Resigned Retired						
		Terminate	Ч			
		rennnale	u			
Transferring to another location within the Diocese						
Transferring to						
Parish / School / Institution						
Comment (Optional)						
Signature						
Pastor or Principal						
Date _						
Mail:	Diocese of Covin Attn: Payroll Offi 1125 Madison Av Covington, KY 4	ice /enue	Email: Phone: Fax:	(859) 39	<sup>@</sup> CovDio.org 92-1558 92-1589	