

# Employee Payroll Records Transmittal

Complete this form when an employee separates state service or transfers to another agency or sub-agency. The losing agency completes this form and forwards to the gaining agency. Keep a copy of this form and all documents for your records.

Employee Last Name:

First Name:

Middle Name:

Personnel Number:

Agency:

Last Date Carried:

## Leave Balance as of Last Day of Employment

Enter the balance reflected in the Leave System. Unless losing agency is DOL, DOR, ECY, LCB, or LNI, losing agency will need to make any necessary Quota Corrections in HRMS to ensure it reflects an accurate leave balance.

Transfer from DOT, DOL, DOR, ECY, LCB, LNI, or WSDOT?                      Yes                      No

If yes, gaining agency must make HRMS Quota Corrections.

Are accruals included in leave balance for month of separation?                      Yes                      No

Career Shared Leave balance:                      Hours:

FMLA used in previous 12 months?                      Yes                      No

Personal Holiday taken?                      Yes                      No                      If yes, date taken:

Personal Leave Day taken for Fiscal Year?                      Yes                      No                      If yes, date taken:

Sick Leave balance end of prior year:                      Hours +

YTD Sick Leave accrued:                      Hours –

YTD Sick Leave taken:                      Hours =

Sick Leave balance:                      Hours

Vacation Leave balance:                      Hours

Military Leave balance: Hours

Comments:

**Preparer Certification**

Preparer certifies that information is true and correct to the best of their knowledge.

Preparer's Name:

Job Title:

Email:

Phone:

Date Prepared:

**To**

Agency/Division:

Contact Name (if known):

Email:

Phone:

Mail Stop/Address:

Please be sure to include the following documents if required:

EFT (Direct Deposit)	All past and current Life Insurance Forms	Other Current Deductions
Credit Union Deduction Card	All past and current LTD Forms	Statewide Garnishment (not agency specific)
Union Card (if necessary)	Child Support Orders	Retirement & Beneficiary Forms (copies)
Other Enrollment Forms	All Medical & Dental Enrollment forms	Leave Balance Report (copies)