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| bw-medium | **Payroll Services****Fixed Remuneration Form****The Casual Employee Action and Change Form must be submitted in conjunction with this form in order for payment to occur.** |

NOTE: Employment may not commence before and is conditional upon Financial Services Authorization.

 **Any forms that are incomplete will be returned to the department.**

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| Employee/ Student Number: A | Last Name:  |  First Name: |
| SIN : | Date of Birth (DD-MM-YYYY): |  Position Number: |

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| Description of Work (mandatory) :  |
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| **Banner Budget Code:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Pay Date(DD/MM/YY) | Service Worked | Hours Worked per Week | Amount (Weekly) | Total Bi-Weekly |
| From (DD/MM/YY) | To (DD/MM/YY) |
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|   |  |  | Total Remuneration: | $ ………………………… |

Prepared By: …………………………………………………………………………...

Department Authorization: (Print).................................................................................. Date: ……...................................

 (Signature)........................................................................... Phone Ext: ……………………..

Financial Services Authorization: ……………………………………………………. Date: …………………………...

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| **OFFICE USE ONLY** |  |
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White – Payroll Services Department-Keep copy for your records Dec 15, 2016