

LABOR DISTRIBUTION

EMPLOYEE NAME	BSU EMPLOYEE ID NUMBER (if unknown leave blank)	POSITION NUMBER	CR POSITION NUMBER	
				RECORD TYPE
DEBIT ACCOUNT NUMBER	CREDIT ACCOUNT NUMBER	AMOUNT	HOURS	
1 _____	_____	_____	_____	_____
2 _____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____
5 _____	_____	_____	_____	_____
6 _____	_____	_____	_____	_____
7 _____	_____	_____	_____	_____

PAYROLL DATED AFFECTED: _____

EXPLANATION OF DISTRIBUTION: _____

EXPLANATION OF FUTURE LABOR DISTRIBUTIONS: _____

EFFECTIVE DISTRIBUTION DATES:

START DATE	END DATE	DEBIT ACCOUNT	PERCENT
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____
4 _____	_____	_____	_____

DEPARTMENT APPROVAL	DATE	BUDGET OFFICE APPROVAL	DATE
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