

Campus Box 7233 Raleigh, NC 27695-7233

Revised: 07/29/2008

## Check Distribution Code (CDC) Payroll Coordinator Add/Update/Delete

This form should be used to: Update (add, change or delete) a departmental check distribution code (CDC) Update the departmental payroll coordinator information related to a CDC

This information is used for distribution	n of pay statements, W-2's a	nd other payroll rela	ated information.	
ADD/DELETE CHECK DISTRIBUTION (	CODE			
Request new	Request new CDC		Delete Current CDC	
Department Name			Department OUC	
Payroll Coordinator Name				
Campus Phone			r	
For off-campus units only, please desig				
US Postal Ser	vice			
Federal Expres	ss (at department's expense	e)		
Reason for request				
UPDATE PAYROLL COORDINATOR IN	IFORMATION			
OI DATE I ATROLL COORDINATOR IN	II ORMATION			
Department	CDC	For Payroll:	☐ Bi-Weekly	Monthly
Change Effective Date				
			Check here if this is	a new location address
Delete Current Payroll Coordinator	Name			_
Add New Payroll Coordinator	Name			<u> </u>
	E-mail			_
	Phone Number			_
APPROVAL (REQUIRED)				
Department Head Signature			Date	
Sı	ubmit completed form to U	niversity Payroll		
Mailing Address:		•	Physical Address:	

Fax# 919-515-4320

Administrative Services - Bldg II

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