Instructions – Payroll Distribution Authorization

This form is required to authorize employees to pick up and distribute Pay Warrants

Request Type – Check the appropriate box to describe the action to be taken. If a change in name is the action requested, please enter the old name information.

Employee Information – Enter the Last Name, First Name, MI, and Email address of individual being authorized to pick up and distribute Pay Warrants. Please note that this individual may not pick up Pay Warrants for any of the Reporting Units for which they are authorized to approve payroll documents.

Effective Date – Enter the effective date (mm/dd/yy) that the individual being authorized to pick up and distribute Pay Warrants is to begin.

Department Name – Enter the name of the department of the above named individual.

Phone Number – Enter the phone number of the above named individual.

DeptID – Enter the DeptID of the above named individual. The DeptID must be five digits.

Reporting Unit Name – Enter the name of the Reporting Unit(s) that the above named individual is being authorized to pick up and distribute Pay Warrants.

Reporting Unit Number – Enter the reporting unit(s) number for the above named reporting unit(s). Reporting Unit number must be three digits.

DeptID – Enter the DeptID(s) for the above named reporting unit(s). DeptID number must be five digits.

Approved by Authorized Department Administrator – Enter name and title of the authorized department administrator.

Signature/Date – Signature of the above Authorized Department Administrator. This signature authorizes the individual named to above to pick up and distribute Pay Warrants for the Reporting Unit(s) indicated. Enter the date from is signed.

Submit Completed Form to:
Payroll Office
Payroll Distribution Authorization
Warren Hall 675