

REQUEST_FOR_MANUAL_PAYROLL_CHEQUE_FORM-1

Employee Information

Last Name	First Name
Employee ID	Position Number

Reason for Manual Cheque

Pay/Timesheet Information

	Date: MM/DD/YYYY	Earn Code	Hours	Fund	Cost Centre/ Project	Account Code
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Manager Name (please print)	Ph:	Date of Request:
Cheque delivery instructions :		
Payroll Only		
Pay Period(s) Adjusted:	Cheque Issued Date:	Initials: