

Payroll Stop Payment Request Form

Employee Name: _____ SUID: _____

Phone: _____ Address: _____

Email: _____

Check Information:

Check Number	Check Date	Check Amount
Total Amount		

Employee Signature: _____ Date: _____

*****Payroll Use Only*****

Current Employee Status: _____ Paygroup: _____

DD Setup/Verified:

No DD, issue Check

Notify Employee: _____

Verify check(s) status via JP Morgan Chase Access and email this form to Treasurer's Office

Processed By: _____ Date: _____

*****Processing Information*****

Earnings Code: STP

Add to Next Payroll: WE PPE OR Online Check:

Comobo Code: 000009316 Chart String: 11-91005-00000-101009

Payline: _____

Entered By: _____ Date: _____

Reissue Check/Advice No.: _____ Pay Date: _____

Enter on Liability Sheet:

Emailed Barb Fuller By: _____