



EASTERN OREGON
UNIVERSITY

One University Boulevard
La Grande, OR 97850
Payroll, Inlow Hall Room 205
(541) 962-3286

Authorization to Pick up Payroll Check

I _____ give Eastern Oregon University payroll department permission to allow _____ to pick up my paycheck. I understand that this person is authorized to pick up my paycheck for this pay period only unless specified below. I understand that my paycheck will not be released to this person if they do not provide photo ID upon pickup. Form must be provided to payroll prior to the 25th of the month.

Reason for having check picked up:

I want my check picked up (choose one)

One Time Only: ___ Other: ___ Start Date: _____ End Date: _____

**ALL AUTHORIZED PAYROLL CHECKS TO BE PICKED UP ARE
SUBJECT TO APPROVAL**

Employee:

Printed Name: _____ ID# _____

Signature: _____ Date: _____

Name of person authorized to pick up check: _____
(This person must have a state issued ID with them to pick up the check)

Picked Up By:

Printed Name: _____ Date: _____

Signature: _____

For Office Use Only

Date Received: _____ Approved by: _____