

# PEPPERDINE UNIVERSITY

## PAYROLL HANDCHECK REQUEST

### Notes

1. Handchecks take 24-48 hours to process.
2. Handchecks are for emergencies only and requires the Vice President's signature over your area.
3. Submit to Payroll with the supporting documentation.

### Employee Information (All fields are required)

Name (Last, First, MI) \_\_\_\_\_ Campus-Wide ID \_\_\_\_\_  
Department \_\_\_\_\_ Campus \_\_\_\_\_ Extension \_\_\_\_\_  
Amount \$ \_\_\_\_\_

### Chartfield Information

Business Unit	Fund	Dept	Account	Class
Program	Product	Project	Operating Unit	

### Reason for Handcheck

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Check Delivery Information

Call Employee for Pick Up     Call Requestor for Pick Up     Mail to Employee's Home Address

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. \_\_\_\_\_

Requestor (Signature) \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_ Extension \_\_\_\_\_

Major Area Budget Manager (Signature) \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_ Extension \_\_\_\_\_

Vice President (Signature) \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_ Extension \_\_\_\_\_