

<p align="center">PAYROLL USE ONLY</p> <p align="center">OFF CAMPUS</p> <p align="center">YES <input type="checkbox"/> NO</p> <p>ACCT# _____</p>
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AUTHORIZATION TO MAIL PAYCHECK

I, _____ CWID # _____,
Print Name

authorize Cal State University, Fullerton Auxiliary Services Corporation Payroll to mail my paychecks for every pay period forward to my home address. I also understand should I want the mailing of any of my future paychecks to be stopped I will need to submit written instructions indicating such to the Payroll department.

Verification of address: _____

Signature: _____

Department: _____

Date: _____