

MANUAL CHECK REQUEST FOR EXEMPT EMPLOYEE

Request is due Friday 5 pm and will pay the following Friday.

Date Prepared:	Preparer's Name: <u>Masked Rider</u>					
Dept. Name:	Contact Phone: (806) 123-4567					
Dept. Org #:	Chart of Account: 🖌 T S H E					
Employee Tech ID: R	Employee Name:Raider Red					
Fund: <u>12E345</u> Orgn: <u>A12345</u> Acct: <u>1</u>	1A1234 Program: 123 Position: T H S W E					
Fund: Orgn: Acct:	1A1234 Program: <u>123</u> Position #: <u>12345</u> Suffix: <u>L1</u>					
Payment Request Dates per Month	From: 04/01/15 To: 04/30/15					

If the requested payment covers more than one month, please submit a form for each month.

	Earnings Code	Shift	Units
	ADC	1	1
L			

Please check a general reason AND input an explanation as to why there is a need to issue a manual check.										
	Pay increase	✓ Delayed ePaf	Faile	ed to submit ti	mesheet		Owed additional salary		Wrong shift code	
ePaf	ePaf was not submitted and approved in time to be applied to the monthly payroll.									

 Employee's Signature:
 ORG Manager's Signature:

Completed & signed forms should be delivered to Payroll Services. Fax: 806-742-1589 Mail Stop: 1092 To receive a confirmation email, send the request to <u>webmaster.payroll@ttu.edu</u>

	Payroll ID	Payroll #	Deductions	Paid On	Paid Only	Personnel/Effective	Position/Suffix
For			Set Up	Same	LNG/CPA	Date Verified	Verified
Payroll				Payroll			
Use Only							
			D 11				
	Eligible	Not	Paid	Not	2 Yr. Service	Wrong Payroll	Didn't Work
Longevity/		Eligible		Paid	Credit Not	Cycle	On The 1 st Of
Hazardous					Fulfilled		The Month