

TEAMWORKS

a Professional Employer Organization

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CHECK REQUEST FORM

Form to be used to request checks between regular payroll schedules and for terminated employees.
This form must be completed in its entirety before a check will be cut. *

Employee Name:
Department: (if applicable)
Company Name:

Date of Request: _____ Payment for _____ to _____.

Reason for Request: Missed hours Replacement
 Paid at wrong rate Termination - See Form
 Other (specify) _____
 Advance* (Cash advance requires an employee signature.)

Check amount: Hours _____ X Rate \$ _____ = Pay \$ _____
Tips (if applicable) \$ _____ Other (specify) \$ _____

_____ Signature of Employment Supervisor	_____ Date
_____ Signature of Employee *	_____ Date

TEAMWORKS USE ONLY Date entered: _____ Entered by: _____

Employee signature required for cash advance. Check will be sent to employee's place of employment unless otherwise specified.
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