WISLEY OFF CYCLE PAYMENT REQUEST FORM

PUBLICIS RE:SOURCES PAYROLL

HR SECTION				
Employee Legal Name	9		CS ID#:	
Ap Pay Group			ADP File#:	
Final Payment Request: (Check the box and enter the state. Applies to states mandating expedited delivery of the final payment to the EE)			APPLIES TO USMS GROUPS ONLY: If the box is unchecked, the manual check request requires additional approval from Rachael Pope, Marie Vitalini, Amanda DeLay, and Nicolette Brady.	
Form Submitted By:			Approved By:	
Signature(required):			Signature REQUIRED	
Gross Amount (\$):			Vacation Hours:	
Last Date Worked:			CA Penalty (\$):	
Paycard Mailing Address & Phone Number:			Payment Delivery Date:	
Reason/Details:				
Method of Payment: (Check the box that applies)		Note: Check box indicates payment method approval by employee is obtained. This box must be checked in order to move forward with payment processing	ADP PUSH DEBIT	PAY CARD EE Has No Bank Acct
Comments (provide any additional information related to pay such as earning codes, pay period, breakdown of hours, etc.):				
Incomplete forms may result in a delayed issuance of the off-cycle payment. Next-day payment delivery requests must be submitted to payroll by 3:30 pm (EST).				
PAYROLL SECTION				
Specialist Name:		0	Date Processed:	
Signature(required):		- P	Paycard Number Push To Debit Confirmation #	
Comments:				

