

UNIVERSITY OF UTAH PAYROLL
REQUEST FOR EARNINGS AND BENEFITS COPY

Date: _____

Please reissue a copy of our Earnings and Benefits Statement for the **pay period ending:** _____

Department Name and Phone Number: _____

Department Org ID and Location Code: _____

Person/Phone authorized for release: _____

Account Executive: _____

Account Executive Approval: _____

Business Unit	Org ID	Activity/Project	Account	Dept. Location Code
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please indicate preferred method of delivery:

_____ Department Fax, Number: _____

_____ Campus Mail, Address: _____