



CALIFORNIA STATE UNIVERSITY BAKERSFIELD

California State University, Bakersfield**9001 Stockdale Highway****Bakersfield, California 93311-1022**

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**DEPARTMENTAL
AUTHORIZATION TO PICKUP
PAY WARRANTS/DIRECT
DEPOSIT STUBS**

Employing Department

The employees listed below are authorized to pickup from the Cashier's Office, payroll warrants and Direct Deposit stubs for their departmental personnel.

| | | |
|--|--|------------|
| Name of Authorized Employee (Last, First, MI) <input type="checkbox"/> Add <input type="checkbox"/> Delete Date _____ (Cashier use) | Signature of Authorized Employee _____ | Date _____ |
|--|--|------------|

| | | |
|--|--|------------|
| Name of Authorized Employee (Last, First, MI) <input type="checkbox"/> Add <input type="checkbox"/> Delete Date _____ (Cashier use) | Signature of Authorized Employee _____ | Date _____ |
|--|--|------------|

| | | |
|--|--|------------|
| Name of Authorized Employee (Last, First, MI) <input type="checkbox"/> Add <input type="checkbox"/> Delete Date _____ (Cashier use) | Signature of Authorized Employee _____ | Date _____ |
|--|--|------------|

| | | |
|--|--|------------|
| Name of Authorized Employee (Last, First, MI) <input type="checkbox"/> Add <input type="checkbox"/> Delete Date _____ (Cashier use) | Signature of Authorized Employee _____ | Date _____ |
|--|--|------------|

| | |
|--|-------------------|
| Department Head Signature Authorization | Date _____ |
|--|-------------------|

Note: persons authorized to pickup pay warrants may not be the same individual who signs attendance reports. Pay warrants must be kept in a locked and secure location. Pay warrants not given to employees within 5 working days must be returned to the Cashier's Office for further handling (per SAM 8580.5).

Attitude Makes the Difference!