

MEMORANDUM:

To: Timekeepers
From: Payroll Supervisor
Subject: Update Authorized Signatures

Ensure that there are 2 (two) different signatures on the AUTHORIZED TIMEKEEPER SIGNATURE line and the AUTHORIZED DEPT SIGNATURE line. The same person should NOT sign both areas.

Please provide Payroll with the following information and return to the Payroll Office ASAP:

Department: _____

Primary Timekeeper: _____

Alternate Timekeeper(s): _____

Authorized Approving Officer/Dept Head: _____

Alternate Approving Officer/Dept Head: _____

Authorized Person(s) for Check Pick-up: _____
