

Date: _____
Insert Date

Attention:
University of Oklahoma
Payroll Distribution
1000 Asp Ave., Room 105
Norman, OK 73019-4071

Re: AUTHORIZED PAYROLL CHECK PICKUP

I authorize the individual listed below to pick up my payroll check dated
_____ on my behalf.
Insert payroll check date

I have attached an image of my photo ID with this letter.

Name of Authorized Individual

Payee's Printed Name

Payee Signature