

Payroll Action Form Instructions

These instructions for completion and submission of the Payroll Action Form are for informational purposes only and should not accompany submission of the document to the Global Payroll team.

The Payroll Action Form should be **faxed to 866-255-4840** or emailed by clicking on this hyperlink: <u>Email Payroll</u>. The Global Payroll team will directly contact the requestor with any questions or additional information necessary to properly process the action form.

EMPLOYEE INFORMATION					
Company Code	This 2 or 3 digit code is available on the employee's pay stub or on the eDirectory				
Employee ID	Enter the 7-digit employee ID for the employee requiring payment. Employee ID is available on the eDirectory and on employee paystubs.				
Employee Name	Enter the employee's full name in order of last, first and middle initial				
Date	Enter today's date in the month, date, and year format				
Work State	Enter the 2-character state abbreviation indicating where the employee works				

REASON FOR ACTION / GENERAL DESCRIPTION				
Reason for Action	Choose one reason that best describes why payment is being requested			
General Description	Select the item that most closely matches your request to ensure proper routing of the forms. For example, if an employee missed overtime on a paycheck, select overtime and the form will be routed to the specific Time Reporting team within Global Payroll.			

REASON DESCRIPTION / DETAILED EXPLANATION						
Effective Date	If applicable, specify the date the action is effective (e.g., the last date worked by the employee in the case of termination)					
Provide Detailed Explanation of Request	Indicate reason for the request and special instructions. To expedite payment, please include specific information, including dates, hours, etc.					

CHECK PAYMENT GUIDELINES

Note: This section does not need to be completed unless you are requesting an overnight paper check for an employee who has been terminated in states requiring final payment on last day of work. Payment will be made based on the employee's current payment method. If an employee has elected direct deposit, the pay will be deposited into the employee's designated bank account(s) currently on file. If the employee is normally paid via a paper check, the check will be mailed to employee's current delivery address (i.e., either the employee's work location or home address).

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Overnight Billing	In limited cases, a paper check may be overnighted to the employee as Global Payroll must promptly issue a check to comply with state laws. For overnight delivery, all data fields, in this section should be completed.
Delivery Location	Complete all fields, including phone number and mailing address. A street address is required for overnight delivery; Global Payroll Is unable to overnight to a Post Office Box.

APPROVALS

Both the requestor and the employee's supervisor, manager or designated Human Resources representative must date and sign the form. The requestor's contact information is provided in case additional information is needed.



Payroll Action Form

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Entry Completed	Initials:	Date:/
		20-194

Please complete this form to request a payroll action or request that a paycheck be issued outside of an employee's normal pay cycle (between pay dates).

EMPLOYEE INFORMATION							
Company Code	Employee ID Number	Employe Last	e Name First	Middle	Date (MM/DD/YY) / /	Work State	
REASON for ACTION (select one) GENERAL DESCRIPTION (select all that apply)							
New Hire			☐ Benefit deductions ☐ Docked hours ☐ Shift pay				
☐ Terminati	on / Final Check*		Check or advice not Garnishments Taxes				
Time Repo	orting Adjustmen	t \square	☐ Commissions/Special pay* ☐ Overpayments ☐ Other				
Other			☐ Disability/Leave of absence ☐ Overtime				
REASON DESCR	IPTION / DETAILI		al pay includes all incentive pay (bo IATION	nuses), awards, military pay, a	and salary changes.		
Effective date		1 1					
Provide detai	led explanation of	f request					
CHECK PAYMEN	IT GUIDELINES					v	
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file. If no direct deposit information is available, a paper check will be mailed to the employee's normal paycheck address, unless otherwise indicated below.							
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77			ia (includes all termina				
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	: (select only one opt						
Overnight Carrier: Fed-Ex UPS Your account number:							
SRM: Provide name & V-code for direct billing Name and V-code:							
Delivery Location	(check one):	Home	Office				
Recipient Name:				Recipient Phon	e: ()		
Street Address: City:	Street Address: City: State: ZIP Code:						
APPROVALS			Signature		Phone (
Requestor's Name Supervisor's Name			Signature Signature		Phone () -	
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Fax this completed form to 866-255-4840 or email Payroll.

Have a Payroll Question? Global Payroll offers multiple channels from About You>Your Info>My Pay

- Ask Penny virtual agent- available 24 hours a day
- Email available 24 hours a day, with responses provided within 24 hours of receipt during regular business hours
- Live Chat available through Ask Penny 10 am -3 pm Eastern Time from Monday through Friday