



MOLLOY COLLEGE
ROCKVILLE CENTRE, NEW YORK 11571-5002

MAIL PAYCHECK/CHECK STUB AUTHORIZATION FORM

DATE: _____

ATTN: Accounting Office

FROM: _____
(Please Print Name)

SUBJECT: Payroll Check

I prefer to pick up my paycheck (or stub for direct deposit) in person.

I prefer to have my paycheck (or check stub for direct deposit) mailed to the address on my W-4.

Signature