



## Request for Replacement Pay Advice

1. Enter your information
2. Print and sign (NO ELECTRONIC SIGNATURE ACCEPTED)
3. Mail to the University Payroll Office (email accepted)

A replacement will only be mailed to the address on file with the University. For help verifying/updating your address, follow the instructions outlined by Human Resources at [http://hr.illinoisstate.edu/current/address\\_change.php](http://hr.illinoisstate.edu/current/address_change.php) or call (309) 438-8311.

### Personal Information

I am a: \_\_\_\_\_ Delivery: \_\_\_\_\_  
 UID: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*If you are picking up your pay advice, bring in a photo ID (such as University ID card or Driver's License)*

### Mailing Address

*Note: This address must match the address on file with the University*

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*For non-U.S. addresses only*

Region: \_\_\_\_\_ Country: \_\_\_\_\_ Mail Code: \_\_\_\_\_

### Authorization

*This form is considered invalid if it has been altered in any way or any unauthorized additions have been made to it.*

I am requesting my pay advice for the following pay date: \_\_\_ / \_\_\_ / \_\_\_\_\_

Employee Signature \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_\_\_

Printed Name \_\_\_\_\_

### University Payroll Office (UPO) Use Only

Date Mailed \_\_\_ / \_\_\_ / \_\_\_\_\_ UPO Initials \_\_\_\_\_

Pickup Date \_\_\_ / \_\_\_ / \_\_\_\_\_ Employee Signature \_\_\_\_\_