

EPAYSTUB ENROLLMENT/CHANGE REQUEST

GENERAL INSTRUCTIONS

What is ePayStub? ePayStub is an online version of a printed paystub. The ePayStub option is available only to employees who have elected to be paid by direct deposit. On payday, employees who have elected the ePayStub option may elect to receive an e-mail reminder that their paystub is available online. Employees may access and print their ePayStub online via the Employee Service CenterSM, a secured Web site. A printed paystub will not be sent to employees who receive ePayStub. If you have additional questions, contact Administaff at 877-804-8978 or by e-mail at websupport@administaff.com.

Note

- If an employee is paid by a physical, negotiable check for any reason, the employee will receive a printed paystub.
- Receipt of the ePayStub notice does not guarantee funds have been deposited into the specified bank account(s). It is the responsibility of each employee to verify funds are deposited into such account(s).

Arizona and Wyoming Employees Only

Complete, sign and submit this printed form to your Administaff payroll specialist.

COMPLETION INSTRUCTIONS

Se	ction	1.	Com	plete	all e	emp	loye	e in	formation.	١.						
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Section 2. Complete to enroll in ePayStub.

Section 3. Complete to cancel ePayStub.

Send the completed and signed original form to your Administaff payroll specialist.

If you have additional questions, contact Administaff at 877-804-8978 or by e-mail at websupport@administaff.com.

SECTION 1. EMPLOYEE INFORMAT	TION	(Complete all fields.)				
First Name	MI	Last Name	Social Security Number			
Client Company Name	I				Clie	ent Number
E-mail Address (Check one for e-mail	locati	, =	me ork	Work Phone		Home Phone
SECTION 2. EPAYSTUB ELECTION	V (Che	eck the box below to enroll in ePayStub.)				
address listed above. I unders secured link to my paystub. I provided free of charge, at whi understand that I can view and that I can obtain a printed copy	tand thave ich I of I o	o electronically. I would like my pathat on my payday I may be sent a regular access at home or work to an view and print my paystub, incit my paystub at any time via the Enty paystub information at any time on or change my e-mail address at fying my request.	n e-n o a co cludir mplo e by r	nail containing omputer termin ng during work yee Service Co naking a reque	a renal arenal arena Test to the second arenal aren	eminder and a nd printer, hours. I r. I understand o Administaff. I

SECTION 3. EPAYSTUB CANCELLATION (Check the box below to cancel ePayStub.)							
I am currently enrolled in the ePayStub program and want to cancel my enrollment.							
By completing this form and signing below, I authorize Administaff to take the action selected above.							

Should my employment be terminated, I acknowledge that my final pay may be a physical, negotiable paycheck. I acknowledge that Administaff reserves the right to reverse direct deposit of funds paid in error.

SIGN AND DATE THE FORM

Employee Signature	Date Signed

