

Stop Payment Request

Employee Name		_BlazerID
Employee ID#	Phone	Email
I am an employee of the University of Alabama at Birmingham and do certify that I have NOT cashed the payroll check for which I am requesting a stop payment due to (check the reason that applies to you)		
☐ Misplaced ☐ Damag	ged Never Received	d □Stale-dated (> 90 days)
□ Other (please explain)		
Employee's Signature Date Please send completed form to Payroll Services via fax (205) 975-4739 or email (payhelp2@uab.edu).		
To be completed by UAB Payroll Services		
Check Number	Check Date	Check Amount
Replacement check	Hold for pickup	Mail