



## Request for Copy of Check Stubs (Pay History)

If you would like payroll to provide you with a copy of your check stub information, please complete the following information:

Date of Request: \_\_\_\_\_ Number of Copies: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Employee Phone Number: (\_\_\_\_) \_\_\_\_\_ Job Title: \_\_\_\_\_

Fax Number: (\_\_\_\_) \_\_\_\_\_ Attn: \_\_\_\_\_

**\*\*\*The Payroll department will provide the requested copies within 3 business days and contact you by phone when your pay stubs are available to be picked up at the front desk.\*\*\***

List the specific pay dates for which you are requesting a copy:

_____	_____
_____	_____
_____	_____
_____	_____

The reason for my request is:

- Unable to log into iSolved. (You can print your own pay stubs by logging into the iSolved website at: <https://mysolved.com/UserLogin.aspx>)
- I need assistance from the payroll department to setup my iSolved account.
- I don't have an email.

*I certify that I am the person for which I am requesting pay information for and am either a current or former employee of United Cerebral Palsy of Southern Arizona.*

Employee Signature: \_\_\_\_\_

Date \_\_\_\_\_