



I, _____, voluntarily authorize Drake University to forward my paycheck by mail. I understand that without such written authorization, the employer may no longer forward my paycheck by mail. I further understand that this authorization may be revoked at any time with written notice to Drake University.

Name (Print): _____

Drake ID#: _____

Signature: _____

Date: _____

Address: _____

City: _____

State: _____ Zip: _____

CC: HR - Original
Payroll
Department