## PAYROLL TRANSACTION AUTHORIZATION FORM

			Agency Code(s)  Date	
AGEN	CY NAME			
	nt to the provisions of Section 110 of the State or approve payrolls submitted to the Bureau or		aw, the following are authorized to electronically roll Services for the above-named agency.	
	NY SUBSEQUENT AUTHORIZATION CHATING <b>ALL</b> AUTHORIZED SIGNATURES.	ANGES, A	NEW AC2822 MUST BE COMPLETED	
	Signature of Department or Agency Head With Name Typed or Printed Below	_	Title – Typed or Printed	
	Authorized Signature with Name Typed or Printed Below	_	Title – Typed or Printed	
1.		-		
2.		-		
3.		-		
4.				
5.				
6.				

This form must be retained in the Agency Payroll office and be made available upon request by the Office of the State Comptroller