



Greene County Authorization To Pick-Up Paycheck/Paystub

TO: Payroll / Human Resources
1034 Silver Dr.
Ste. 201
Greensboro, GA 30642

I _____ (*employee's name*) do hereby
authorize _____ (*person receiving check/check stub*)
to receive my pay check(s)/check stub(s) payable _____
(*pay date*). I agree that this form shall serve to hold the employer harmless from any further
claims by myself in regards to the above payroll check.

Employee's Signature

To be signed by person receiving check
in presence of person issuing check.

Date

Date