Division of Human Resources & Organizational Effectiveness

Payroll Payment Cancellation

Privacy Notice: State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information; and (3) have the information corrected at no charge. To request this information, contact Payroll at payroll@tamu.edu or (979) 845-2711.

Employee Name	UIN
Pay Period	**Pay Date**
Department Name	**Department Contact Name & Email**
Gross Overpayment	**Net Overpayment * *(will be calculated by Payroll)***

Indicate Type of Cancellation:

☐ **Total payment cancellation for employees enrolled in Direct Deposit**
Only check this box if Payroll will receive this form no later than 3 business days after the pay date listed above.
Must include a copy of the Direct Deposit Reversal Notification to Employee Form with this form.

☐ **Total payment cancellation – HUB collects Check**
HUB HR Professional is responsible for collecting a check from the employee made payable to TAMU, TAMHSC or TAMUG in the amount of the net overpayment and then submit the check and this form to Payroll.

☐ **Partial Payment Cancellation – HUB collects Check**
HUB HR Professional is responsible for collecting a check from the employee made payable to TAMU, TAMHSC or TAMUG in the amount of the partial net overpayment and then submit the check and this form to Payroll.

Explanation of Cancellation:

_____   _____
Department Head, Dean or Director Signature   Date

_____
Print Name of Department Head, Dean or Director