



**LIVE PAY WARRANT DISTRIBUTION  
DEPARTMENT DESIGNATED REPRESENTATIVE (DDR)  
AUTHORIZATION FORM**

**FISCAL YEAR:**

Bayramian Hall, Room 100R | Phone: (818) 677-8000 Option 1 | Email: disbursements-l@csun.edu

Date: Department or College Name:

Department ID(s):

Department Contact Email(s):

**IMPORTANT**

**Under no circumstances will a person authorized to certify attendance (MPC) or approve pay documents have custody of pay warrants at any time (SUAM 3812.1). Return this form to University Cash Services.**

Update – Effective Date: (Updated forms replace all prior authorization forms.)

CSUN ID#:	Print Name:	Signature:	Ext:
CSUN ID#:	Print Name:	Signature:	Ext:
CSUN ID#:	Print Name:	Signature:	Ext:
CSUN ID#:	Print Name:	Signature:	Ext:

**I authorize the above-named individuals to pick up pay warrants for employees assigned to my college or department. Individuals must present CSUN ID card for pick up.**

Dean/Director Signature: Print:

Title: Date:

**PAYROLL DEPARTMENT USE ONLY**

**VERIFICATION SECTION:**

Verifying employees who pick up pay warrants does not certify attendance.

Payroll Services Initials

Date Verified