



OFFICE OF THE COMPTROLLER

REQUEST FOR STOP & REVERSE PAYROLL DIRECT DEPOSIT FORM

TO			
OFFICE OF THE STATE TREASURER AND RECEIVER GENERAL CASH MANAGEMENT DEPARTMENT TELEPHONE: (617) 367-9333 FAX: (617) 523-1068			
Payroll Reversal Information <small>To Be Completed by Agency</small>			
Agency Name		Date of Request	
Agency Address			
Street Address		City	State Zip
Agency Contact		Phone Number	
Employee Name		Employee Phone Number	
Account Information			
Account Number <small>Credited</small>		Routing Number <small>Credited</small>	
Account Type <small>Check One</small> <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
Dollar Amount <small>Net</small>		Pay Date	
Brief Explanation for Request			
Has Employee Received DynaCash Check?			
Signature			

The Massachusetts State Treasury will use this form to file for a Payroll Reversal. Please note that when the credit is received at the Treasury, it is provisional. Monies are then held for ten (10) business days before a check can be issued. If the employee has received a DynaCash check, the check from the Treasury will be made out to the Employee or Commonwealth of Massachusetts.