



File Guardian Employee Check Stub Delivery Employee Sign Up Form

Client Code: _____

Date: _____

Company Name: _____

Your employer has signed up for emailed check stub delivery. If you would like to have your check stubs sent to you via email, please fill out the information below and return the form to Eagle Payroll Service. The completed form can be returned to us via Fax or email.

The fax number is 978-640-4958 and the email address is kviola@eaglepayroll.com

Once your account has been setup you will receive an email with your temporary access code and a product tutorial. Your check stubs will be saved and available for download on our secure network for 1 year after the check date.

First Name: _____ **Last Name:** _____

Email Address: _____

Employee Number: _____ (This number can be found on the top left corner of your check stub)

I authorize Eagle Payroll Service Inc. to email a copy of my check stub to the above email address.

Signature: _____ **Date:** _____

Supervisor Signature: _____ **Date:** _____

<p style="text-align: center;">Internal Use Only</p> <p>Setup Date: _____ Confirmed EE #: _____ Welcome Email Sent: _____ FGX Setup: _____ Setup By: _____</p>
