Print Form

PAYROLL REVERSAL REQUEST FORM

TO: OFFICE OF THE STATE TREASURER AND RECEIVER GENEREAL
ONE ASHBURTON PLACE, 12TH FLOOR
BOSTON, MA 02108-1608
TELEPHONE: (617) 367-9333 x530
FAX: (617) 523-1068
ATTENTION: GAIL ST. CYR, DIRECT DEPOSIT ADMINISTRATOR
gstcyr@tre.state.ma.us

PLEASE FAX FORM TO (617) 523-1068

PAYROLL REVERSAL INFORMATION:

TO BE COMPLETED BY AGENCY	
DATE OF REQUEST:	
AGENCY NAME:	
AGENCY ADDRESS:	
AGENCY CONTACT:	TELEPHONE:
EMPLOYEE NAME:	EMPLOYEE NUMBER:
ACCOUNT NUMBER (CREDITED):	ROUTING NUMBER (CREDITED):
ACCOUNT TYPE (CHECK ONE): CHECKING:_____	SAVINGS: _____
DOLLAR AMOUNT (NET):	PAY DATE:
BRIEF EXPLANATION FOR REQUEST:	
HAS EMPLOYEE RECEIVED A 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.	