

PAYROLL DEDUCTION AUTHORIZATION

SECTION 1: Employee Information

Employee Name: _____ SSN: _____

Home Address: _____

City, State, Zip: _____

SECTION 2: Authorized Payroll Deductions

DEDUCTION A

Reason for Deduction: _____

Per Pay Deduction: _____ Total Amount to be Deducted: _____

Deduction Start Date: _____

DEDUCTION B

Reason for Deduction: _____

Per Pay Deduction: _____ Total Amount to be Deducted: _____

Deduction Start Date: _____

DEDUCTION C

Reason for Deduction: _____

Per Pay Deduction: _____ Total Amount to be Deducted: _____

Deduction Start Date: _____

I hereby authorize the above amount/s to be deducted from my pay with each payday until the total amount due is collected.

Employee Signature: _____ Date: _____

Employer Signature: _____ Date: _____