Authorization for Payroll Deduction

Name (please print):	
Please deduct	from my check beginning with the month of
and se	end this amount to
This is the total a	amount to be deducted.
This is in addition	n to the amount that is already being deducted.
This is a deducti	on in the amount that is already being deducted.
Signature:	Date:
	·
Authorizatio	n to Discontinue Payroll Deduction
	·
Name (please print):	
Please stop payroll deduc	tion to
from my check beginning	with the month of
Signature:	Date: