

Payroll Deduction Authorization

_____ Project Name

This is to authorize _____ to deduct from my check the following:
Company Name

	<u>Payment of:</u>	<u>\$ Amount</u>		<u>Frequency of deduction *</u>		
1	Loan	_____	O	___ W	___ B	___ Other _____
2	Retirement	_____	O	___ W	___ B	___ Other _____
3	Advance	_____	O	___ W	___ B	___ Other _____
4	Savings	_____	O	___ W	___ B	___ Other _____
5	Savings Bonds	_____	O	___ W	___ B	___ Other _____
6	Uniforms	_____	O	___ W	___ B	___ Other _____
7	Dependent Medical	_____	O	___ W	___ B	___ Other _____
8	Dependent Dental	_____	O	___ W	___ B	___ Other _____
9	Child Support	_____	O	___ W	___ B	___ Other _____
10	Insurance Premiums	_____	O	___ W	___ B	___ Other _____
11	Union Dues	_____	O	___ W	___ B	___ Other _____
12	Profit Sharing	_____	O	___ W	___ B	___ Other _____
13	Donations	_____	O	___ W	___ B	___ Other _____
14	Other (explain)	_____	O	___ W	___ B	___ Other _____
15	Other (explain)	_____	O	___ W	___ B	___ Other _____
16	Other (explain)	_____	O	___ W	___ B	___ Other _____

Date: _____

Employee Signature: _____

Printed or Typed Name: _____

* O = one time deduction
 W= weekly deduction
 B= bi-weekly