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## Voluntary Payroll Deduction Form

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### Employee Data

- Name: \_\_\_\_\_
- Employee Number: \_\_\_\_\_
- Position: \_\_\_\_\_
- Department: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Telephone: \_\_\_\_\_

### Deduction Specifications

- Deduction Purpose: \_\_\_\_\_
- Amount per Deduction: \_\_\_\_\_
- Start Date of Deduction: \_\_\_\_\_
- End Date of Deduction: \_\_\_\_\_
- Deduction Interval:  Weekly  Bi-Weekly  Monthly

### Consent

I voluntarily authorize the payroll deduction as detailed above and understand I may revoke this authorization by providing written notice.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Confirmation

Authorized by: \_\_\_\_\_

Date of Authorization: \_\_\_\_\_