



**DEDUCTION AUTHORIZATION**

DATE \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_  
EMPLOYEE NAME \_\_\_\_\_ TITLE \_\_\_\_\_

I authorize the Company to withhold the amount of:

- maximum allowed by law
- or
- \$ \_\_\_\_\_ per pay period

for payment of an obligation in the total amount of \$\_\_\_\_\_. This withholding should begin immediately and continue until the obligation is paid in full. I agree that in the event of the termination of my employment for any reason, the entire amount due and owing becomes immediately due and payable and will be deducted from my paychecks. I understand that to revoke this authorization I must submit the revocation in writing to the Payroll Department. The revocation will become effective if approved by Client Company. Revocation does not absolve me of the debt amount still owed.

**TYPE OF OBLIGATION**

- Employee Loan
- Advance
- Employee Purchase  
Purchase Type: \_\_\_\_\_
- Deduction for uniform (for non-exempt employees only)
- Other \_\_\_\_\_

*By my signature below I understand and agree with the terms written above and that I have signed this form voluntarily.*

**EMPLOYEE SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**DEDUCTION START DATE** \_\_\_\_\_ **DEDUCTION END DATE** \_\_\_\_\_

RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_  
POSTED BY \_\_\_\_\_ DATE \_\_\_\_\_  
REVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

**Special Instructions**

\_\_\_\_\_  
\_\_\_\_\_