**Authorization for Payroll Deduction Form**

**Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOR EMPLOYEE: Fill in the appropriate blanks, then sign and date at the bottom.**

**BLANKET DEDUCTION**: (the employee authorizes the client to deduct up to a specific amount from their paycheck at any given time).

I HEREBY AUTHORIZE THE DEDUCTION FROM MY PAYCHECKS, AN AMOUNT NOT TO EXCEED $\_\_\_\_\_\_\_\_\_\_\_ FROM PAY PERIOD TO PAY PERIOD, FOR ANY OF THE FOLLOWING DEDUCTIONS (circle all that apply).

Advance(loan) Purchases Food Miscellaneous Gas Uniforms Tools

Stop Payment Fee Child Support IRS Levy Other Garnishment Other\_\_\_\_\_\_\_\_\_\_

**REOCURRING DEDUCTION:** (the employee authorizes the client to deduct, for a specific reason, a specified amount from each paycheck for a specific length of time).

Type of deduction Amount per pay Start Date\*\* Total Due

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

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 \*\*date must fall within pay period the deduction is to start.

**ONE-TIME ONLY DEDUCTION:** (the employee authorizes the client to deduct, for a specific reason, a specified amount from a single check).

Type of deduction Amount per pay Start Date\*\*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

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 \*\*date must fall within pay period the deduction is to start.

Upon the conclusion of my employment relationship, I authorize my employer to deduct from my final paycheck any unpaid balance I owe, and any deductions that may be pre-paid on my behalf (i.e. insurance coverage). Also, I grant my employer the right to correct any electronic fund transfer resulting from an erroneous overpayment to me by debiting my account to the extent of such overpayment.

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

Signature of Employee Date

\*\*Employers: Deductions may not be made from an employee’s wages if the employee’s earnings will be reduced below the required minimum wage or overtime compensation.