

# EMPLOYEE PAYROLL DEDUCTION AUTHORIZATION FORM

United Way Donation to wear Jeans on Fridays for one year

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

**Employee ID:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payroll Deduction:

I authorize North Central Health Care (NCHC) to deduct $25.00 from my paycheck, dated \_\_\_\_\_\_\_\_\_\_\_\_\_ for donation to United Way to wear jeans on Fridays. I understand I will be invoiced for any balance remaining if the payroll deduction is insufficient to pay the total in full.

**Employee Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_