

**WEST VALLEY-MISSION COMMUNITY  
PAYROLL DEDUCTION AUTHORIZATION**

\_\_\_\_\_ **CLASSIFIED** \_\_\_\_\_ **ACADEMIC** \_\_\_\_\_ **FULL TIME** \_\_\_\_\_ **PART-TIME**

**SOCIAL SECURITY #:** \_\_\_\_\_ **\*\*\*EFFECTIVE DATE:** \_\_\_\_\_

**EMPLOYEE NAME:** \_\_\_\_\_  
LAST FIRST MI.

**DEDUCTION CONTROL: CONTRIBUTION TO BE DEDUCTED FROM:** \_\_\_\_\_ **10** \_\_\_\_\_ **11** \_\_\_\_\_ **12** **PAYCHECKS**

COMPANY/DEDUCTION NAME	<b>CHECK ONE</b>			AMOUNT FROM EACH PAYCHECK	PAYROLL CODE
	NEW	CHANGE	STOP		

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**\*\*\*PAYROLL DEPARTMENT MUST RECEIVE BY THE 15<sup>TH</sup> OF THE MONTH TO BE EFFECTIVE ON THE END-OF-MONTH PAYROLL.**