

Authorization for Payroll Deduction

Date					
Employee Name					
Social Security #					
Home Address					
Home Phone					
I authorize San Jose State University Foundation to deduct from my paycheck the following:					
#	Deduction Type	Amount	Monthly / Semi-Monthly	Start Date	Stop Date
1	University Parking				
2 4 th Street Parking					
3 Capital Club Membership		ship			
4					
This authorization is in effect until I notify the HR / Payroll Dept writing to cancel it. SIGNATURE date					Dept. in
HR	– Noted By:				
Da	te:				
Pay	yroll – Noted By:				
Da	te:				