Payroll Deduction Authorization Form

General Information	
Date:	
Client Name:	Client Number:
Employee Name:	Employee Number:

I, ________, hereby authorize Axis PEO to make deductions from my paycheck as stated below. In the event of termination of my employment, I understand that the entire amount immediately becomes due and payable and will be deducted from my final paycheck.

Deduction Information
Total Repayment Amount: \$
Reason for Loan or Deduction:
Amount to be Deducted per Pay Period: \$
Date Deductions Start:
Date of Final Deduction (if necessary):

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Employee Signature:

Supervisor's Signature:

Date Received:

Date:

Date: