



PAYROLL DEDUCTION FORM
Personal & Confidential

Client Name		Department/Division	Effective Date
Employee Name		Social Security Number	Today's Date

Type of Deduction	Total Requested Amount	Deduction Amount Per Pay Period
<input type="checkbox"/> Uniforms	\$	\$
<input type="checkbox"/> Beepers	\$	\$
<input type="checkbox"/> Loan 1	\$	\$
<input type="checkbox"/> Loan 2	\$	\$
<input type="checkbox"/> Advances	\$	\$
<input type="checkbox"/> Other	\$	\$
<input type="checkbox"/> Other	\$	\$
<input type="checkbox"/> Other	\$	\$
<input type="checkbox"/> Other	\$	\$
<input type="checkbox"/> Other	\$	\$

I hereby authorize Modern Business Associates (MBA) to make the above deductions from my pay in accordance with the above terms. I understand and agree that I am responsible for satisfying the above amounts. I understand and agree that any amount that is due and owing at the time of my termination, regardless of whether my termination was voluntary or not, will be deducted from my last paycheck. This authorizes my employer to retain the entire amount of my last paycheck in compliance with the law. I further understand and agree that deductions will be made after any federal or state requirements as well as for any MBA or _____ programs in which I have enrolled, for which I am eligible, or to which I have agreed. (Client Name)

Employee Signature: _____ Date: ____/____/____

**PLEASE FAX COMPLETED FORM TO THE MBA PAYROLL DEPARTMENT
727.563.1502 or 1.866.896.2528**