## SOUTHERN PERSONNEL MANAGEMENT, INC.

## AUTHORIZATION FOR MISCELLANEOUS PAYROLL DEDUCTION

To: I	Payroll Department	
From	m:Employee Name	Dept.: Client Company
Date:	; <u> </u>	
You are he	ereby authorized to deduct a total of \$	from my payroll check(s) For:
This is to b	be deducted in the following manner:	
0	Installments of \$ per p	ay period
	One time deduction for full amount owed	
	Other (please specify):	
	n or layoff if I have not met this obligat	
	Signed:	
	Client Represe	ntative: