

Payroll Deduction Authorization

I, _____ hereby authorize The NELCO® Companies to deduct \$ _____ from my paycheck over the next _____ pay periods for a total deduction amount of \$ _____, starting on _____.

The purpose of this deduction is:

- Loan/Advance
- * Uniform
- * Tools
- * Independent Client Benefit
- Other _____

In the event my employment with the client company is terminated for any reason, I authorize the total remaining balance due be deducted from my final check(s).

****Note: Should I decide to end these deductions the Client Company and the employee must notify the NELCO Payroll Department in writing. By signing below I also acknowledge, I am aware that NELCO is not responsible for non-payment of independent client benefit(s) by the Client Company.***

Employee Printed Name

Social Security #

Employee Signature

Date

Client Company Representative Printed Name

Title

Client Company Representative Signature

Date

Payroll Input Technician

Date

