



### Authorization for Payroll Deduction

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

SS#: \_\_\_\_\_ Guard Card #: \_\_\_\_\_

Date of Hire: \_\_\_\_\_ Full Time: [ ] Part Time: [ ]

I UNDERSTAND THAT DURING MY EMPLOYMENT THERE MAY BE DEDUCTIONS FROM MY PAYCHECK FOR VARIOUS REASONS.

LET THIS FORM SERVE AS VOLUNTARY AUTHORIZATION FOR **PRIDE SECURITY** (EMPLOYER) TO DEDUCT MONIES FROM MY PAYCHECK FOR THE PURPOSES CHECKED BELOW. I UNDERSTAND BY MY SIGNATURE THAT UPON TERMINATION FROM MY EMPLOYMENT FOR ANY REASON, ALL MONIES OWED WILL BE DEDUCTED FROM MY FINAL PAYCHECK WITHOUT FURTHER AUTHORIZATION. I WILL ALSO UPON TERMINATION OR UPON REQUEST IMMEDIATELY RETURN ALL COMPANY PROPERTY.

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Employee Signature

Date

REASON FOR DEDUCTION(S):

UNIFORMS  LIST: \_\_\_\_\_

COMPANY EQUIPMENT  LIST: \_\_\_\_\_

OTHER  EXPLAIN: \_\_\_\_\_

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TOTAL AMOUNT OF DEDUCTION(S): \$ \_\_\_\_\_

IS THIS A ONE TIME DEDUCTION: \_\_\_\_\_ YES \_\_\_\_\_ NO

IF "NO", PLEASE DEDUCT \$ \_\_\_\_\_ PER PAY PERIOD UNTIL PAID IN FULL

**\*FORMS MUST HAVE EMPLOYEE SIGNATURE IN ORDER TO BE PROCESSED**

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DATE RECEIVED: \_\_\_\_\_ DATE PROCESSED: \_\_\_\_\_

PROCESSED BY: \_\_\_\_\_

AUTHORIZED SIGNATURE (PRIDE SECURITY, LLC)