

FINANCIAL INSTITUTION DEDUCTION AUTHORIZATION

See Management Directive 315.7.

EMPLOYEE NAME	EMPLOYEE NUMBER	DEPARTMENT NAME
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I hereby authorize the Commonwealth of Pennsylvania to
 (Check one) Start Stop Change
 bi-weekly payroll deductions to the Financial Institution shown below. Payroll deductions should
 begin as soon as practicable after the effective date shown.

BI-WEEKLY PAYROLL DEDUCTION \$	EFFECTIVE DATE	EMPLOYEE SIGNATURE	
FINANCIAL INSTITUTION USE ONLY	FINANCIAL INSTITUTION NO.	FINANCIAL INSTITUTION NAME	
	BRANCH NO.	BRANCH NAME	
	MEMBER ACCOUNT NO.	APPROVAL SIGNATURE	DATE
PERSONNEL USE ONLY	EFFECTIVE WITH PAY DATE OF		

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