

PAYROLL DEDUCTION AUTHORIZATION

CLIENT INFORMATION:	
Name:	SSN
Client Company:	
DEDUCTION INFORMATION:	
Type of Deduction (i.e., uniform, loan, advance, etc):	Payroll Commencement Date:
Total Amount of Deduction:	Amount of Deduction per Pay Period
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Total Amount of Deduction:	Amount of Deduction per Pay Period \$
I hereby authorize INTEGRITY EMPLO above deductions from my pay in account and agree that I am responsible for understand and agree that deduction requirements as well as for any IN	OYEE LEASING ("INTEGRITY") to make the ordance with the above terms. I understand r satisfying the above amounts. I further ns will be made after any federal or state NTEGRITY or e enrolled, for which I am eligible, or to which
Signature	 Date