



Employee Deduction Authorization

 Employee Name (Last, First, Middle Initial)

 Empl ID (7 digits)

Payroll Type:

- Biweekly (All Hourly Employees)
- Monthly (All Salaried Employees)

Payroll Deduction Information
Check Appropriate Deduction Code

Selection	Code	Description	Deduction Schedule
<input type="checkbox"/>	00ACTR	Accounts Receivable	Deducted from EACH paycheck
<input type="checkbox"/>	18CDL	Child Development Lab	Deducted from 1st/2nd Biweekly
<input type="checkbox"/>	18RCOE	Rent - Condition of Employment	Deducted from EACH Biweekly
<input type="checkbox"/>	18FNDU	Employment UGA Foundation	Deducted from EACH Biweekly

Frequency of Deduction
Complete Appropriate Box Below

One-Time Deduction

Amount of Deduction \$ _____

This amount will be deducted from the employee's next regularly scheduled paycheck. UGA Central Payroll will notify you if there was insufficient net pay for this amount.

Ongoing Deduction

Deduction Amount \$ _____

This amount will be deducted according to the Deduction Schedule detailed above.

Effective Date (Required): _____

- Deduction to Begin on the Effective Date
- Deduction to End on the Effective Date Above
 (if Biweekly employee, enter end date prior to begin date of next biweekly pay period)

 Employee Signature

 Date

 To be used by UGA Central Payroll:

 EMPL ID

