



Payroll Deduction Authorization Form

I,, her	eby authorize Clark- Pleasant Co	orporation
to withhold from my	(Employee Printed Name) wages the total amount of \$	per pay
period for the purpos	e of my CP Education Foundatio	n Donation.
Coordinator, in Human Repurpose of this form and the I authorize a payroll de	form and return it to Melissa Buesources. To confirm your under to authorize the deduction, sign duction to deduct my CP Educat my paycheck until I state other	rstanding of the and date below ion Foundation
Employee Identification Nun	nber:	_
Print Name		
Signature	Date	