

Contra Costa Community College District

Payroll Deduction Authorization Form

Employee Name: _____

Employee ID/SSN: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Home Phone: (_____) _____ **Email:** _____

Please check one of the following:

New Deduction: _____ Terminate Deduction: _____ Change Deduction: _____

Organization _____

Address: _____

City: _____ **Zip:** _____

Phone: _____ **Current Amount/Percentage:** _____

New Amount/Percentage: _____ **Effective Date:** _____

I hereby authorize Contra Costa Community College District (CCCCD) to initiate a payroll deduction, terminate a payroll deduction, or change a payroll deduction, as appropriate based on the selection I have checked above.

I understand that if I am initiating or changing a payroll deduction, the deduction may not be made if I have insufficient income in a pay period to cover this and other required and authorized deductions, and will not hold CCCCDC liable for any deductions not made.

I understand that if I am terminating a payroll deduction, the deduction may still be taken during the current payroll due to the time needed to process the termination, and will not hold CCCCDC liable for any deductions made.

I understand that I am changing a payroll deduction; the change may not take effect during the current payroll cycle due to the time needed to process the change.

I agree that this deduction shall be made each month until changed or cancelled by submission of a Payroll Deduction Authorization Form.

CCCCD shall have no liability for any loss suffered by the Employee with regard to his/her selected company; or for funds transmitted in the manner authorized by its Tax Sheltered and Investment Programs and/or a 457 CalPERS plan. All deductions shall be made in accordance with Education Code Sections 22810, 22811 and 22812; Internal Revenue Code of 1954 as amended; Section 17512 of the California Revenue and Taxation Code and of the Plan adopted by the Governing Board of CCCCDC.

Employee Signature: _____ **Date:** _____

FOR PAYROLL USE ONLY

Entered By _____ Date: _____ Deduction Code: _____