

Northeastern State University Payroll Deduction Authorization

The undersigned acknowledges indebtedness to Northeastern State University and authorizes said amount to be deducted from wages or salary as a payroll deduction. The minimum amount eligible for deduction from payroll is \$50 per pay period.

The start date of the payroll deduction is Date: _____
 Next payroll

The amount of \$_____ shall be withheld from each pay until the total of \$_____ is paid in full.

Please Type or Print Name

Signature

ID Number

Date