

Iowa Park CISD

Payroll Deduction Change Form

I _____, hereby authorize the
the Iowa Park C.I.S.D. Payroll Office to change the following payroll deductions(s): .

Note: This form cannot be used to cancel the Health Insurance or the Cafeteria Plan. See Payroll.

Payroll month to begin new amount	Name of Company	Current Amount	New Amount	(Office Use Only) Ded. Code	(Office use only) Entry Date

Signature of Employee _____

Campus _____ Date _____