



AUTHORIZATION FOR VOLUNTARY PAYROLL DEDUCTION

I, _____ hereby authorize
(Print employee's name)

Conotton Valley Union Local School to deduct from my wages

for: CV Employees' Scholarship Fund in the sum of \$_____.

To be deducted every pay of each month, to begin _____.
(Date)

Please STOP my deduction for the CV Employees'
Scholarship Fund effective _____.
(Date)