

GRAND TRAVERSE PAVILIONS

EMPLOYEE PAYROLL DEDUCTION AUTHORIZATION

I _____ authorize the Grand Traverse Pavilions to
Print Employee Name

withhold \$ _____
Amount (**minimum of \$25**)

For:

I wish to have the amount deducted in the following manner:

- One-Time Deduction Two Deductions

Employee Signature

Date

*** A minimum amount of \$25.00 is required to qualify for payroll deduction**

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