



Payroll Deduction Authorization

Location: 325 N. Wiget Lane, Suite 130, Walnut Creek, CA 94595 Phone: 925-939-5626 eFax: 925-380-2864
Mailing: PO Box 4156, Walnut Creek, CA 94596-0156

Name: _____ Employee ID or Last four of SSN: _____

Facility Employed: _____ Dept: _____

To: TPMG/KFH Payroll Processing

I hereby authorize you to deduct the following amount from my pay each period and deposit same to the above credit union. I understand that special conditions may cause delay in issuing funds to the credit union. The credit union is authorized to cancel, reduce or increase the amount to be withheld and use the deduction proceeds to pay toward savings and/or any amounts owed to the credit union.

New Change from \$ _____ .00 to \$ _____ .00 per paycheck

Signature: _____ Date: _____