



Payroll Deduction Change Form

I hereby authorize the City of Jonesboro to make the following changes to my payroll deductions:

START / STOP _____ in the amount of \$ _____.
(Name of deduction)

START / STOP _____ in the amount of \$ _____.
(Name of deduction)

START / STOP _____ in the amount of \$ _____.
(Name of deduction)

Print Name

Signature

#

Last 4 digits of SSN

Date