

**PITTSBURG UNIFIED SCHOOL DISTRICT
PAYROLL DEPARTMENT
2000 RAILROAD AVENUE
PITTSBURG, CA 94565
(925) 473-2310/473-2311
Fax (925) 473-4210**

REQUEST FOR TERMINATION OF PAYROLL DEDUCTION

Employee Name

Employee Number

You are requested and authorized to **DISCONTINUE** from my salary the following monthly payroll deductions:

Company Name/Deduction Description

Monthly Amount

Company Name/Deduction Description

Monthly Amount

Company Name/Deduction Description

Monthly Amount

Company Name/Deduction Description

Monthly Amount

Company Name/Deduction Description

Monthly Amount

Employee Signature

Date