

# AUTHORIZATION TO STOP EARNINGS WITHHELD

Print Name: \_\_\_\_\_ I.D. # \_\_\_\_\_

I hereby request Andrews University ~~STOP~~ the following deduction: \$ \_\_\_\_\_

LI VWRSSLQJ     GHGXFWRQ 0867 VXEPLW     WK HOHFWURQL

from each of my bi-weekly payroll checks for (check one):

Completed form to Payroll office

DIUROO 2IILFH 8VH 2C  
5 G BBBB BBBB BB RFV  
BBBBB WHBBBBB