TO:	Payroll Office	San Diego Unified School District		
SUBJECT:	Request for Payroll Deduc	e		
You are requested an	nd hereby authorized to deduct \$	per month from 1	my salary for dues or premium	
to the You Run This Town Foundation - PD77150, o		r any other amount later required by that organization. Please		
deduct beginning wit	h the next payroll possible, or beginning	(spe	ccify if later date is desired).	
		Month of Earnings		
	X	(Signature)	(Date)	
Payroll changes MUS	ST BE RECEIVED BY	22IN		
THE TENTH OF THE MONTH; other- wise, effective date is delayed one month.		PRINT NAME		
TO:	Payroll Office	San Diego Unifie	d School District	
SUBJECT:	Request for Payroll Dedue	ction		
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		Month of Earnings		
	X	(Signature)	(D a4a)	
			(Date)	
Payroll changes MUS	ST BE RECEIVED BY	SSN		
THE TENTH OF THE MONTH; other-			DDINT NAME	
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		Month of Earnings		
	X	(Signature)	(Date)	
		SSN	(2)	
	ST BE RECEIVED BY			
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more checking uale is	aciayea one month.			