TO:	Payroll Office	V	allejo City Unified School District
SUBJECT:	Request for Pay		5 5
You are requested	and hereby authorized	to deduct from my salary	\$
per month for dues	or premium, or any o	ther amount later required	by that organization, and transmit to the
<u>You Run This Town I</u>	Foundation — #12370	This authorization shall be	in full force and effect until revoked by me or
by the organization.	V		
	A	(Signature)	(Date)
Certificated	SSN		
This authorization sha			-
effect until revoked by	me or by the organi-	Classified	
zation.			PRINT NAME
TO:	Payroll Office	V	allejo City Unified School District
SUBJECT:	Request for Pay	roll Deduction	
You are requested	and hereby authorized	to deduct from my salary	\$
-	-		by that organization, and transmit to the
			in full force and effect until revoked by me or
by the organization.			
	X		
		(Signature)	(Date)
Certificated	SSN		-
This authorization sha			
effect until revoked by zation.	me or by the organi-	Classified	PRINT NAME
TO:	Payroll Office	V	allejo City Unified School District
SUBJECT:	Request for Pay	roll Deduction	
You are requested	and hereby authorized	to deduct from my salary	\$
			by that organization, and transmit to the
You Run This Town I	Foundation — #12370	This authorization shall be	in full force and effect until revoked by me or
by the organization.	x		
	·	(Signature)	(Date)
Certificated	SSN		_
This authorization sha			
effect until revoked by	me or by the organi-	Classified	PRINT NAME
zation.			I NILLI INATIE