TO: Payroll Office					West Contra Costa Unified School								
Distri	ct												
You are	e requested	per month from my salary for dues or prem											
for	You Run	This Town Foun	dation —V	endor P	339—c/o Βι	ılger Le	<u>enards</u>	on & <i>P</i>	Assoc., or	any other	amou	ınt later re-	
quired	by that	organization.	Please	deduct	beginning	with	the	next	payroll	possible,	or	beginning	
		(specify	if later dat	e is desir	ed).								
	Month of Ea	arnings		X									
		·				ignature))				(Date	e)	
Payroll	changes M	IUST BE RECEIV	ED BY				_						
THE TENTH OF THE MONTH; other-								PRINT NAME					
wise, ef	fective date	e is delayed one mo	onth.										
TO:			West Contra Costa Unified School										
Distri	ct												
	_	l and hereby autho							-	-		_	
for		This Town Foun				_				•			
quired	by that	organization.	Please	deduct	beginning	with	the	next	payroll	possible,	or	beginning	
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Payroll	changes M	IUST BE RECEIV	ED BY				_						
THE TENTH OF THE MONTH; other-									PRINT NAME				
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TO:		Payroll	Office			W	est C	ontra	a Costa	Unified	Scł	 100l	
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		e is delayed one me							P	RINT NAM	ΙE		