

**University of Wyoming Payroll Deduction Authorization Form
2009 Football**

Date _____

Customer # _____

Total Deduction \$ _____

Name _____

Employee ID # _____

Full Time Part Time Department _____

Signature _____

OFFICIAL USE ONLY *July* _____ *August* _____ *September* _____

Please complete, sign and attach to your renewal application and return before the March 16th Deadline!

**University of Wyoming Payroll Deduction Authorization Form
2009 Football**

Date _____

Customer # _____

Total Deduction \$ _____

Name _____

Employee ID # _____

Full Time Part Time Department _____

Signature _____

OFFICIAL USE ONLY *July* _____ *August* _____ *September* _____

Please complete, sign and attach to your renewal application and return before the March 16th Deadline!