



University of North Carolina Wilmington

PAYROLL AUTHORIZATION

To: HUMAN RESOURCES

From: _____ Banner ID # _____

SECTION I: Authorization to Begin Deductions

I hereby authorize UNCW Payroll office to begin deductions in the amount of

\$ _____ for _____ to become effective _____.
(Pay Date)

Signature Date

SECTION II: Authorization to Change Deductions

I hereby authorize UNCW Payroll office to change my deductions for _____ from

\$ _____ to \$ _____ to become effective _____.
(Pay Date)

Signature Date

SECTION III: Authorization to Cancel Deductions

I hereby authorize UNCW Payroll office to cancel my deductions in the amount of

\$ _____ for _____ to become effective _____.
(Pay Date)

Signature Date