IVY LANE CORPORATION
VOLUNTARY PAYROLL DEDUCTION AUTHORIZATION

Shoes for Crews Purchase Program

Style # _____ Size & Width _____ Store # _____

☐ New Employee ☐ Current Employee

Employee Name _____ Employee ID# _____

Shoe Cost $_____

+Postage $ $7.98

Total Due $_____

I, _____ ,authorize Ivy Lane Corporation

to deduct from my net pay in 2 equal payments up to a maximum

of $_____
(Total from above)

I acknowledge that this deduction is for purchase of safety work shoes from the Shoes For Crews program.

Should I leave the employment of Ivy Lane Corporation before the full amount has been paid in full I authorize Ivy Lane Corporation to deduct the remaining balance due from my final pay check. If there remains an outstanding balance after payroll deduction I authorize and guarantee that I will make full payment to Ivy Lane Corporation within 21 days of my final day of employment.

_____ _____
(signature of employee) grx# (date)
My electronic signature is authorization by me for Ivy Lane Corporation to deduct the amount listed above as payroll deduction to reimburse Ivy Lane Corp. for this purchase.

_____ _____
(signature of supervisor) grx# (date)
My electronic signature is my verification that the employee has personally entered their signature on the line above and that the employee has personally agreed to the conditions of this agreement.

Send this completed form to **shoes@ivylanecorp.com**
Store Manager should allow the employee to complete their signature line personally. No other person should electronically sign this document. You must verify by entering your name on the Supervisor signature line.

Date shoes ordered _____ Reference # _____
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