

Clackamas ESD

Voluntary Payroll Deduction – Coffee/Tea Fund



Name: _____ EE #: _____
(please print)

☐ I authorize Clackamas ESD to deduct \$8.00 per paycheck towards the coffee/tea fund effective

_____.

☐ I authorize Clackamas ESD to discontinue the coffee/tea fund payroll deduction effective

_____.

Employee Signature: _____ Date: _____