

Payroll Deduction Authorization Form

After you have obtained the signature from your Center's authorized representative, send the authorized copy of this completed form to your Center's AIARC coordinator by email.

This form only applies if AIARC processes payroll for your Center. Complete this form to deduct amounts from your monthly pay based on your employment agreement with your Center.

Participant Name (Surname, First, Middle)	Center	AIARC ID#
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Please enter the dollar amount for the type of deduction and estimated time frame. (List deductions in U.S. dollars.)

Type of Deduction	Monthly Amount (in USD)	From (mm/yyyy)	To (mm/yyyy)
Loan – Auto			
Loan – Housing			
Loan – Other (please specify)			
Loan – Advance (please specify)			
Loan – Personal (please specify)			
Personal Account (amount paid directly to participant from Center's local office)			
Salary Adjustment (amount paid locally that needs to be adjusted in AIARC's record)			
Foreign (Non-U.S.) Tax (Center handles your foreign tax information directly)			
Travel – Voluntary (Reimbursement of non-business travel expenses)			
Miscellaneous (please specify)			

Participant Acknowledgment:

1. I hereby authorize my employer to deduct the above amounts from my monthly pay.
2. I understand that this authorization will remain in effect until I or the Center notifies AIARC in writing that the authorization no longer applies, regardless of the estimated time frame designated above.
3. I further understand that I have no recourse against AIARC for any amounts deducted from my pay. My sole recourse for any deduction issues in regard to my pay shall be against my employer.

Participant Signature

Date (dd/mm/yyyy)

Center Acknowledgement:

The Center agrees with the above-listed deductions and will notify AIARC of any changes in regard to amounts and corresponding time frames.

Signature of Authorized Employer Representative

Date (dd/mm/yyyy)