

**City of Austin
Deduction Request Form**

APA

This form is the employee's authorization to start, stop, or change the amount of a payroll deduction that is being deducted for the employee organization identified below. Return signed forms to the Payroll Office. Extra forms may be photocopied, or are available from the Payroll Office, Municipal Building, 1st floor, 124 West 8th Street (phone 974-3001).

Employee Name (print or type): _____

Social security number: _____

Amounts to Deduct – Biweekly

(Must Show \$0 to Discontinue a Deduction)

The "Total biweekly deduction" is sent to: Austin Police Association (A.P.A.)

AP1= Austin Police Association Dues \$ _____

Amounts to Deduct – Monthly

The "Total monthly deduction" is sent to: Austin Police Association (A.P.A.)

AP2= Austin Police Women's Association Dues \$ _____

AP3= Texas Police Officers' Association Dues \$ _____

AP4= Austin Police Political Action Committee (PAC) Dues \$ _____

AP5= Austin Cops for Charities \$ _____

AP6= Police and Firemen's Insurance \$ _____

AP7= APA Member s Dues for the "100" Club \$ _____

AP8= Associate Membership-Civilians \$ _____

AP9= Amigos En Azul \$ _____

Employee Authorization

I request the City of Austin to **deduct amounts listed above** from my pay and forward these deductions to the **Austin police Association (APA)** beginning on the first available pay day on or after the "request effective date" I have shown below (check one box only):

Deduct the "Monthly amounts" for each AP account listed individually. In the event that the APA notifies the payroll Office of increases or decreases to the underlying amounts, I request the City or Austin to begin deducting the "Monthly Amounts" on the first available pay day after the effective date identified in the APA notification. I understand that I may revoke this authority I have granted to APA, by submitting at any time a new Deduction Request Form. I understand that such a revocation is applicable beginning with the next available pay day after I have submitted a new Deduction Request Form to the **APA Office** (i.e. revocations are not retroactive).

Employee signature

Request effective date (the Payroll Office will make these deduction changes on the first available pay day after this date)