

## CANCELLATION OF VOLUNTARY PAYROLL DEDUCTION

Use this form to cancel any voluntary payroll deduction. Be sure to specify what deduction you wish to cancel and the effective date of the cancellation. In order to facilitate the processing of your deduction cancellation form, please sign and date the form and forward to the correct Department below:

- Human Resources (M/S 503): Basic Life Insurance, Supplemental Life Insurance (Employee, Spouse, and/or Domestic Partner – specify below), Supplemental Accidental Death and Dismemberment Insurance, Medical, Dental, and Vision.
- Finance / Payroll (M/S 610): Union Dues and Charitable Campaign.
- Facilities Management (M/S 404): Parking (please contact the Facilities Management Property Coordinator @ 425-388-3482 to cancel parking deductions).

NAME (Please print):	
EMPLOYEE ID #:	
DEPARTMENT:	
CANCELLATION EFFECTIVE (MONTH / YEAR):	
PLEASE CANCEL THE FOLLOWING VOLUNTARY PAYROLL DEDUCTION(S):	

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_