

**PANAMA-BUENA VISTA UNION SCHOOL DISTRICT**  
4200 Ashe Rd - Bakersfield, CA 93313  
(661) 831-8331

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**REQUEST TO CANCEL PAYROLL DEDUCTIONS**

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TO: Payroll Department

You are hereby requested to discontinue the following voluntary deductions from my salary:

	Company or Organization	Type of Deduction	Code #
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Please stop these deductions effective (date): \_\_\_\_\_ For the payroll of \_\_\_\_\_  
(month)

Employee Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Employee ID#: \_\_\_\_\_

Date: \_\_\_\_\_