

LAST NAME FIRST MI AGENCY

PPS FORM 7111 GENERAL DEDUCTION

710 ADD 720 CHANGE 730 ADJUST

EMPLOYEE SOCIAL SECURITY NO. [R]

40010 - GENERAL CITY
40014 - FIRE

A DEDUCTION CODE / YR. PAY PERIOD STOP DATE [R]

B DEDUCTION AMOUNT OR DEDUCTION PERCENT [R]

C +/- DED. ADJUSTMENT AMOUNT +/- FRINGE ADJUSTMENT AMOUNT [R]

TO THE FINANCE DIRECTOR:
I HEREBY AUTHORIZE THE CITY
OF DETRIT TO DEDUCT THE SUM
INDICATED HEREIN FROM MY

EARNINGS BI-WEEKLY
 WEEKLY

REMITTED TO DEATH BENEFIT

DATE EMPLOYEE SIGNATURE

LAST NAME FIRST MI AGENCY

PPS FORM 7111 GENERAL DEDUCTION

710 ADD 720 CHANGE 730 ADJUST

EMPLOYEE SOCIAL SECURITY NO. [R]

110N1 - GENERAL CITY
110N2 - DOT
110N3 - WATER
110N4 - SEWERAGE
110N7 - FIRE

A DEDUCTION CODE / YR. PAY PERIOD STOP DATE [R]

B DEDUCTION AMOUNT OR DEDUCTION PERCENT [R]

C +/- DED. ADJUSTMENT AMOUNT +/- FRINGE ADJUSTMENT AMOUNT [R]

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