

**CITY OF HOUSTON
PAYROLL DEDUCTION AUTHORIZATION & CANCELLATION FORM**

_____ hereby authorize the City of Houston to deduct / stop

\$ _____ from my pay check each scheduled cycle and remit to :

_____ Blue Santa Program, Inc. 8300 Mykawa Houston, TX 77048
(Company Name and Address / City, State, Zip Code)

_____ Officer / Houston Police Department _____ (832) 394-1600
(Agent's / Representatives Name) (Agent's Phone Number)

In payment of goods and services purchased by me.

I understand the City Of Houston neither sponsor nor endorses the product or services purchased from the above company, nor does it attest to the worth or value of the product or service. I understand, except when restrictions to federal laws apply, that I may cancel this authorization at any time, in writing, by executing a Form 6 (revised 10/91). In consideration of the City providing this service, I agree not to hold the City liable for any loss resulting from failure to deduct and/or remit the payment specified. I will pay directly to the company and monies not withheld during payroll cycle. I will request directly from the Company and changes to my Company. I certify that no portion of this deduction is for a Political Action Contribution (PAC) or any other purposes prohibited by City of Houston Legislation.

Employee Signature: _____ **Date:** _____

(TO BE COMPLETED BY PAYROLL CLERK)

Payroll #: _____ Dept. No: _____ Dept. Name: _____

CHECK APPROPRIATE BOXES:

	Amount	Type/Plan	Date	Name
() Start Amount:	_____	_____ / _____	_____	_____
() Change If New Amount	_____	_____ / _____	_____	_____
() Stop Amount:	_____	_____ / _____	_____	_____
() One-Time Deduction:	_____	_____ / _____	_____	_____
() One-Time Refund:	_____	_____ / _____	_____	_____

Payroll Clerk

Date Prepared

Dept. Head