(Indicate proper Company by placing an "X" in the box)

☒ **GRMC**

☐ CFG ☐ GAHS

☐ GCC ☐ GHE

☐ GHH&H

Genesys Health System
Payroll Deduction Authorization-EMS Training (M055)

I, _____, hereby authorize Genesys Health System to deduct from my paychecks as noted below. If I terminate prior to the final deduction, I understand the entire remaining balance will be deducted from my paycheck. I understand these deductions may not be cancelled unless the remaining balance is paid in full.

Total amount to be deducted $_____

Deduction each pay $_____

Number of pay periods $_____

_____ _____
Employee Date

_____
Social Security #

Original to Payroll Copy to employee Copy to EMS Education

Form 401
Revised 07/2009