

WEST VIRGINIA DEPARTMENT OF ADMINISTRATION  
ACCEPTANCE AND PAYROLL DEDUCTION AUTHORITY

Employee Name \_\_\_\_\_ Social Sec. No. \_\_\_\_\_ Acct. No. \_\_\_\_\_

I hereby authorize my employer, \_\_\_\_\_  
To withhold \$ \_\_\_\_\_ from my pay each month, and transmit same to the West Virginia Department of Administration for rental of a parking  
space. This authorization will continue in effect until I relinquish use of the parking space. I understand that payroll deduction is a condition for  
use of the parking space.

Lot \_\_\_\_\_ Space# \_\_\_\_\_ Card# \_\_\_\_\_

Date Signed \_\_\_\_\_ Effective Date \_\_\_\_\_

Signature of Employee \_\_\_\_\_