Contributing to ABX CaREs

To make a **one-time** payroll deduction in support of ABX CaREs, fill out **this** section, sign it and forward the form to Payroll at 2061 M.

Print I	Name:								
Emplo	oyee N	umber							
Please amou		my or	ne-time payr	oll deduct	ion in su	upport of A	ABX Ca	REs in th	e
\$1	\$5	\$10	\$25 \$50	Other S	\$				
Signa	ture: _					Date	:		
****	****	:** *:	*****	**** **	*****	*****	****	*****	***
		_	oing payroll rm to Payrol			CaREs fill o	ut thi s	section	, sign it
Print	Name:								
Emplo	oyee N	umber	:						
	e take X CaRE		lowing amou	ınt out of	my payo	check each	pay p	eriod in s	support
\$.50	\$1	\$5	Other \$						
		d that t ng it ou	his deductio t.	n will cont	tinue un	til I notify	ABX Pa	ayroll in	writing
Signa	ture: _					Date	·		

Thanks for contributing to ABX CaREs.