

# CALCASIEU PARISH SCHOOL SYSTEM

PERSONNEL DEPARTMENT  
3310 Broad Street  
P. O. BOX 800  
LAKE CHARLES, LA 70602-0800

Phone: 337-217-4040 Fax: 337-217-4041

## PAYROLL DEDUCTION CANCELLATION FORM

Please cancel the following payroll deduction:

Amount of Present Deduction: \_\_\_\_\_

Type of Deduction (see list below): \_\_\_\_\_

Effective Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_  
Print Clearly

Social Security Number: \_\_\_\_\_

Department/School: \_\_\_\_\_

Job Title/Position: \_\_\_\_\_

Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

**Personnel Dept. must receive Payroll deduction change forms by  
10<sup>th</sup> day of month for change to be effective in the same month.**

0710	CAE/LAE Dues-Teacher
0711	CAE/LAE Dues-Support
0712	CAE Dues-Other
0716	Bus Driver Dues
0717	CFT Dues-Full
0718	CFT Dues-Half
0719	CFT Dues-Quarter
0720	Local 100 Dues
0721	APEL Dues-Teacher
0722	APEL Dues-Support
0800	United Way