

**State Controller's Office
PPSD Payroll Operations
Miscellaneous Deductions Unit
P. O. Box 942850
Sacramento, California 94250-5878**

**Association of California State Supervisors
ATTN: Membership Coordinator
3000 Advantage Way, Suite 210
Sacramento, California 95834**

An employee may write to the State Controller's Office – Payroll Operations, to request cancellation of the following deductions:

- **Charitable Contributions (Code 017)**
- **County Miscellaneous (Code 014)**
- **Credit Union (Code 051)**
- **Insurance (Codes 074 and 075, except 075/083 by contractual obligation)**
- **Membership Dues (Codes 088 and 089; excluding employees who, under terms of their MOU, have a Maintenance of Membership Agreement in effect)**
- **Parking (Codes 050, 360)**
- **State Agency Fees (Code 021)**

For cancellation of a deduction listed above, by the upcoming pay period, cancellation requests must be received in Payroll Operations by the 15th of the month. Cancellations will be returned to the employee, *unprocessed*, if any items are omitted.

A cancellation request must contain the following information:

- **Statement requesting the deduction be cancelled**
- **Employee's full name (as known on departmental records, not nicknames)**
- **Employee's Social Security Number**
- **Deduction(s) to be cancelled by deduction name as it appears on the earnings statement and/or by the deduction/organization code (if known)**
- **Employee's complete mailing address**
- **Employee's ORIGINAL signature**
- **Date request is signed**

IT IS IMPERATIVE THAT YOU KEEP A COPY FOR YOUR RECORDS

MAIL A SIGNED COPY OF THIS FORM TO BOTH ADDRESSES:

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To Whom It May Concern,

Please cancel the deduction for the Association of California State Supervisors (ACSS), effective immediately.

Employee Full Name	Employee SSN

Complete Mailing Address		
Address:		
City:	State:	Zip:

Employee's Signature	Date