

**Southern New Hampshire University - Professional Employees Association (SNHU-PEA)**

***Salary Deduction Agreement***

Name (Please Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Workday ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@snhu.edu

Effective Date: Immediately

Please note that SNHUPEA dues are $150 per year based on SNHUPEA bylaws. SNHUPEA dues are deducted automatically from biweekly paychecks.

By signing below, I elect to have my SNHUPEA dues automatically deducted from my paycheck in biweekly installments of $5.75 and sent to SNHUPEA. This automatic deduction will continue until the SNHUPEA Treasurer has been contacted in writing (e-mail) to terminate said deduction.

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

Employee *(sign and scan)*

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

SNHUPEA Treasurer

Please forward this completed form by email to Liz Henley, SNHUPEA Treasurer at e.henley@snhu.edu.

*Thank you for the continued support of your representative association.*