	**	****COMPLETE THIS SECTION*****
TO:		Human Resources/Payroll
FRC	DM:	<del></del>
BUILDING:		
DAT	E:	
Ple		e following change(s) to my Personnel / Payroll file(s):
	Name:	
>	Address:	
>	County:	(City / State / Zip Code)
>		Jumber:
>	Marital Sta	atus:
>	CITY TAX D	eduction Change (location change only):
	Previo	ous CITY tax deduction from:
	New C	ITY tax deduction to:
	Effect	tive:

## Effective date of change(s):

## **RETURN THIS FORM TO HUMAN RESOURCES**

Effective:\_\_\_\_

**SCHOOL INCOME TAX Deduction Change** (location change only):

Previous School District:

New School District:

NOTE: The above refers to personal data; e.g., address change, marital status, but not changes in insurance plans, etc. You will need to come to Human Resources to make these changes.