**San Mateo County Community College District**

**College of San Mateo**

**Optional Payroll Deduction for all Certificated Personnel**

Payroll authorization: Pursuant to Section 87833 of the Education Code. San Mateo County Community College District is hereby authorized and directed to deduct from each regular salary warrant due for services as certificated employee the sum necessary to pay professional dues as checked. The amount so deducted shall be transmitted to the organization and upon remitting the deduction the District shall have fulfilled its entire obligation and will be held harmless in the event of defalcation on the part of the organization or any of its employees.

This authorization is to remain in force until cancelled or revised by me in writing.

This form must be returned to the District Payroll Department before August 31 of each school year. After August 31, payroll deductions will not be accepted for organization memberships (except for new employees). After August 31, membership dues must be paid by personal check to the organization.

Mark the appropriate selection:

( ) Full Time – College of San Mateo Academic Senate dues: $50 annually. Deductible in a lump sum from the September paycheck.

( ) Part Time – College of San Mateo Academic Senate dues: $20 annually. Deductible in a lump sum from the September paycheck.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Print

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

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

**Send this form to Sharon Himebrook**

**District Payroll Office**

[**himebrook@smccd.edu**](mailto:himebrook@smccd.edu)