



**Miscellaneous Deductions**  
**Screen: MISC(D)**

Employee ID: \_\_\_/\_\_\_/\_\_\_\_ APPT ID\* Name: \_\_\_\_\_

**Deduction Information:**

EFFECTIVE DATE: \_\_\_\_\_  
DEDUCTION TYPE: EI  
OVERRIDE DED AMT: \_\_\_\_\_  
GOAL AMOUNT: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_  
DEDUCTION PLAN: UNIPM  
OVERRIDE DED RATE: \_\_\_\_\_

**Description of Deduction:**

\_\_\_\_\_ POLICE MUTUAL BENEVOLENT ASSOCIATION  
\_\_\_\_\_

**EMPLOYEE AUTHORIZATION:**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_