



MEMORANDUM

TO: Payroll Division, Comptroller's Office, Town of Hempstead
FROM: CSEA Local 880, Town of Hempstead Employees
DATE: _____
RE: United Way of Long Island - Withdrawal

This is to inform you that I, _____, Social Security # (*last four numbers*) _____, hereby wish to withdraw from the United Way of Long Island program. Please cease all automatic payroll deductions to be effective as soon as possible.

Member's Signature

Date