

# IU Benefits and General Deduction Adjustment Form

Employee Name \_\_\_\_\_

Empl ID \_\_\_\_\_ Record # \_\_\_\_\_

Campus \_\_\_\_\_ Dept \_\_\_\_\_ Pay Group: \_\_\_\_\_

## Payment type requested:

On-Cycle       Online Check       Off-Cycle

## Benefit Adjustments

Benefit Plan Type: \_\_\_\_\_ Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Benefit Plan Type: \_\_\_\_\_ Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

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Benefit Plan Type: \_\_\_\_\_ Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Benefit Plan Type: \_\_\_\_\_ Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

## General Deduction Adjustments

Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Ded. Code: \_\_\_\_\_ \$ \_\_\_\_\_ Refund  One-Time Addition

Requestd by \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Approved by \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Adj Entered by \_\_\_\_\_ Date \_\_\_\_\_ Pay Run ID \_\_\_\_\_

Reason \_\_\_\_\_

Mailing address/comments \_\_\_\_\_