Payroll Deduction Authorization

This is to certify that I, _____ have received an advance on my wages in the amount of

		uthorize Anomaly Squared, Inc. ("A per pay period for the next _	
wages advanced to me, the balar If there are not enough funds to	nce owed to Anomal cover the balance du llection fees, includii	ared ends before I have fully repaid y Squared may be deducted from t ue, I will be responsible for paymer ng reasonable attorney's fees, will	my last pay check. nt of the balance
This Agreement shall be governe North Carolina, without regard t	,	under and in accordance with the nciples.	laws of the State of
This Agreement shall bind and ir and assigns.	nure to the benefit of	the parties, their legal representa	atives, successors,
This Agreement is given in consideration.	deration for amount	s advanced by Anomaly Squared t	0
IN WITNESS WHEREOF,		nas executed this as of	
I fully understand and agree to tl	he terms of this Payr	roll Deduction Authorization.	
Signature			
Print Name			

