MISCELLANEOUS DEDUCTION PAYMENT FLORIDA DEPARTMENT OF REVENUE Office of Workforce Management

Date:	
Company:	_
Deduction Code:	
Employee:	
Social Security Number:	

Comments:

Contact: ANNE MARIE HOUGH FLORIDA DEPARTMENT OF REVENUE OFFICE OF WORKFORCE MANAGEMENT PO BOX 10410 TALLAHASSEE, FLORIDA 32302 Phone: (850) 717-6432, Email: HoughA@dor.state.fl.us

