

Payroll Deduction Authority

Name of Employer

Personal information

Payroll Number

Surname

First name

Address

Address

Address

Post code

Home phone

Payroll Deduction Request

Amount requested (£)

In the event that I give or receive notice of termination of employment, I give permission for the payroll section to advise the credit union of the termination date and any monies owing to the credit union be deducted out of my last salary

Member's signature

Date

This payroll instruction replaces any previous instruction

Please quote Credit Union Membership Number.....

Official use only

Authorised by

Date

Credit Union Solutions

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Authorised and Regulated by
the Financial Services
Authority

Registration No416486