



Complete this form for regular deductions to be made from your pay.

Individual to complete

Name

Department/section

Type of deduction

Special deduction 1

Deduction name

Amount per pay period

Total amount *(for fixed value)*

Number of pay periods *(for fixed value)*

Date deductions to begin

Date deductions to finish

Special deduction 2

Deduction name

Amount per pay period

Total amount *(for fixed value)*

Number of pay periods *(for fixed value)*

Date deductions to begin

Date deductions to finish

Signature

I hereby authorise the Payroll Office to deduct the above amounts from my wages.

Signature

Date

Office use only	Received date	Actioned by	Actioned date	Checked by
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