



TO WHOM IT MAY CONCERN

I Employee no. authorise
the SHIRE OF QUAIRADING to deduct from my fortnightly pay, the
following deductions

- a. \$
- b. \$
- c. \$

I would like to CEASE the following deductions from my pay (per
fortnight)

- a. \$
- b. \$
- c. \$

This authority is to commence from (Day) DATE:

I revoke all previous deductions

Employee's Signature: DATE:

Received by Senior Administration Officer-

Signature: DATE:

CEO: DATE:

This form gives authority for the Payroll Office to continually deduct the
abovementioned amounts from each fortnightly pay until it is withdrawn.