



Credit Union Solutions
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Authorised and Regulated by
the Financial Services
Authority

Registration No. 216633

Payroll Deduction Authorisation

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.

I will not vary this instruction without the knowledge and consent of M for Money Credit Union.

I hereby authorise the LB Harrow to supply and make available to the credit union Any personal information they may need in order to recover any money owed by me.

Member's signature

.....

Date

.....

This payroll instruction replaces any previous instruction

Official use only

.....

Authorised by

.....

Date

.....

Please quote Credit Union Membership Number