

PAYROLL DEDUCTION MANDATE

(Please check with Solway Credit Union to ensure your employer accepts payroll deduction)

To the Payroll Department (name of employer)
Please commence deductions of £ per week/month from my wage/salary in favour of Solway Credit Union Ltd
Solway Credit Official Eta
Deductions are to commence from the first available pay date and shall remain in effect until such
time as I give written notice to both Solway Credit Union and Payroll Department of any changes.
Name
Payroll Number
rayion Number
Place of Employment
Signed Date
For use by Payroll Section
Deduction Code
Deduction Ref
Input Week /Month