

## **AUTHORISATION TO DEDUCT**

Name of the Staff:	Employee Number:		
Outlet: Date:			
I am authorizing the NWTL Group Pay Rol K for the purpose of:	l Officer to deduct from	my salary the an	mount of
The deductions will occur every fortnight a commencing on	t an amount of K	for	fortnights,
Signature:			
<b>Authorised by: (</b> Manager / HR Supervis Name, Date and Signature:	or)	Position:	
Remarks/Arrangements:			