



The University of the South Pacific Staff Union

MEMORANDUM

To : **The Paymaster – BURSARY**

From : Dept/Section _____

Email: Tel Extn: _____

Date :

Subject: AUTHORITY FOR DEDUCTION FROM SALARY

I hereby authorise the Bursar to deduct the following sum(s) as indicated from salary due to me *fortnightly/monthly* and pay the same to the University of the South Pacific Staff Union.

This deduction is effective from the next salary due to me.

Subscription \$____:____ per fortnight / monthly

Other: _____ \$____:____ per fortnight / monthly

Total Deduction \$:
=====

I further agree that this authority is irrevocable without the consent of the University of the South Pacific Staff Union.

MEMBER

WITNESS

Signed : _____	Signed : _____
Name : _____	Name : _____
Emp.# : _____	Designation : _____
FNPF#: _____	Date : _____
Date : _____	

UNION REPRESENTATIVE
(For and on behalf of the USP Staff Union)

Signed : _____
Name : _____
Position : _____
Date : _____

(To be signed by any member of the Executive Committee)