

AUTHORITY FOR SALARY DEDUCTION

Name and Surname: _____ ID/Passport/MHR Number: _____

I authorise MHR to deduct the total amount specified on this form from my payment, according to the options selected below.

Instructions for Completing the Deduction Section below:

- Please indicate the applicable deductions by marking them with a ✓.
- Enter the total amount to be deducted.
- In the Deduction Option section, specify the number of deductions by marking the appropriate box with a ✓. Note that if you select 2 or 3 deduction options, the total amount will be divided into equal payment instalments. If the block is greyed out, it means there is no deduction option available, and the full amount will be deducted from your next salary.

TYPE OF DEDUCTION	TICK	AMOUNT	Deduction Options		
			1	2	3
Training <i>(Total confirmed by the MHR facilitator)</i>		R			
Name badge <i>(The first name badge is free of charge. MHR charges a fee for replacing a lost name badge or for issuing a new name badge due to a rank, job title, or surname change)</i>		R			
Access card <i>(The first access card is free. Clients charge a fee for replacing lost cards or for a new card due to a surname change)</i>		R			
TOTAL		R			

Signed _____ on this _____ day of _____ 20____

Signature: Applicant/Panel Member

Signature: MHR Representative

FOR OFFICE USE ONLY

Date deduction instruction was forwarded to MHR Pay office: _____

Deduction submitted by: _____

Deduction processed by: _____