



Authority to Deduct from Payroll

| | |
|------------------------|----------------------|
| Name (in full) | <input type="text"/> |
| Current Address | <input type="text"/> |
| State | <input type="text"/> |
| Postcode | <input type="text"/> |
| Phone Number | <input type="text"/> |

Amount to be deducted

| Type of Payment | Amount (\$) |
|-----------------------------------|-------------|
| Salary Sacrifice | |
| Uniform Purchase/Salary Sacrifice | |
| Cash Advance | |
| Other | |

Please deduct from my wages the full amount of \$_____ from the next pay for the week ending ___/___/___.

I understand that should my employment with Red Rock Recruitment Pty Ltd cease, any amounts owing shall be deducted from my final payment.

Signature: _____ **Name:** _____ **Date** ___/___/___

Office Use Only

FTM's pay to be deducted over _____ pay period.

Signed: _____ Name: _____
Business Development Manager.