



Deduction for Northern Police Convalescent and Treatment Centre

Subscription from Salary

To:- Payroll, Civil Nuclear Constabulary

I

(Names in full. please use **BLOCK LETTERS**)

Authorise the deduction from my salary, until further notice, the Northern Police Convalescent and Treatment Centre current monthly rate of donation to be paid to the Charities Aid Foundation on my behalf. I also agree that if the donation be varied the deduction can be varied accordingly.

Signature **Date**.....

NI Number **Pay No.**.....

Address

.....