



Payroll Deduction Authorisation Form

Aviate Credit Union Ltd.
 Cloghran House, Corballis Way,
 Dublin Airport, Co Dublin
 Tel: (01) 8445187
 payroll@aviatecu.ie

Name:

Account No:

Company Name:

Staff No:

Weekly Fortnightly Monthly

To Payroll Department

I hereby irrevocably authorise and instruct you forthwith to deduct the sum of € each week/fornight/month from my wages/salary, such deductions to be paid to Aviate Credit Union Ltd. on my behalf. I confirm that the deductions are to continue to be made unless notified in writing to Aviate Credit Union Ltd. and I hereby inform the Credit Union to this effect. I acknowledge that, notwithstanding this authority, only those sums which are actually received by the Credit Union shall be credited to my accounts with it and the Credit Union shall have no responsibility for sums deducted on foot of this authorisation but not received by it.

Aviate Credit Union Limited is regulated by the Central Bank of Ireland Limited

Total Deduction €

Signed:

Date:



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Weekly

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Monthly

Group/Family Accounts			Loan Breakdown		
Account No.	€		Loan Type	€	
	€			€	
	€			€	
	€			€	
	€			€	
	€			€	
Total			Total Loans		

Breakdown of Deductions

Car Draw	€	
Shares	€	
Budget	€	
Family A/cs	€	
Group A/cs	€	
Savings	€	
Access	€	
All Loans	€	
Total Deduction	€	

For office use only

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