

GATESHEAD OFFICE

Unit 12, Jackson House,
Jackson Street, Gateshead
NE8 1ED

Over 95 Local Service Points

Tel: 0330 055 3666

STANLEY OFFICE

25-33 Front Street, Stanley,
Co Durham DH9 0JE

Web: www.nefirstcu.co.uk



Payroll deduction order

Please return this form to NEFirst Credit Union for forwarding to the Director of Finance

I hereby authorise the Director of Finance to deduct the sum of £_____ each
(*week/fortnight/month) from my wages/salary and remit the amount to NEFirst Credit Union. I agree to deductions commencing from the next available pay date and to remain in effect until such time as I give notice, in writing, to NEFirst Credit Union, of any change.
(*delete as appropriate)

Surname: _____

First Name(s): _____

CUMembership Number: _____

Employer: _____

Payroll Number: _____

Department: _____

Signature: _____ Date: _____

For Office Use Only

Membership no: _____ Date received: _____

Date sent to payroll dept: _____