



Pay Number:

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Name:

Department:

Occupation:

Name of Employer:ANGUS COUNCIL.....

Please deduct the amount stated below from my salary:

£.....

Month Commencing

Signature:..... Date:

This form must be returned to the Credit Union Office and not to your Pay Office.
Angus Credit Union is regulated by the Financial Services Authority

For Office Use Only

Received: **To Angus Council:**

Please quote Membership number in reference _ _ _ _