

Automatic Deduction (ATD) Request Form

Branch : _____



**Pangkalahatang Serbisyo at Seguridad
ang Layunin ng Ating Institusyon**

The Director
Finance Service

I, _____, a member of the _____ presently assigned at _____, do hereby execute this authorization to undertake the following:

- authorize the PNP Finance Service to deduct from my payroll the amount of 1,250 Pesos beginning _____, 20____ as my Capital Contribution to be credited to my account no. _____ representing my initial deposit and payment of Membership and ID fee.
- Authorize the Finance Service to deduct from my payroll acct the amount of Php _____ every month beginning _____, 20____ as my Capital Contribution with account no. _____ Premium Savings with account no. _____
- Stop my Capital Contribution Premium Savings deduction of Php _____.
- Adjust my monthly Capital Contribution Premium Savings deduction from Php _____ to Php _____.

I sign this _____ day of _____, 20____.

SIGNATURE OF CLIENT OVER PRINTED NAME

Unit/Office Assignment: _____

SIGNATURE OF PSSLAI REPRESENTATIVE

Printed Name: _____

****DO NOT HONOR WITHOUT THE SIGNATURE OF THE PSSLAI REPRESENTATIVE**