Constabulary Station

_____

_____

_____

_____

Date: .....

DIRECTOR OF FINANCE
J.C.F FINANCE BRANCH
NORTH TOWER
2 OXFORD ROAD
KINGSTON 5

DEDUCTION ORDER

KINDLY: ☐ Make ☐ Amend ☐ Cease

Deductions to _____

Amount: The amount equivalent to one percent (1%) of my Basic salary or such sums as may be approved from time to time to be deducted monthly for payment to the United District Constables Association in respect of Membership contribution.

Per: ☐ Month ☐ Forth/nightly

Effective: _____

Employment # _____

Name: _____

Yours respectfully,

_____