



**ESTATE POLICE ASSOCIATION OF TRINIDAD & TOBAGO**

**AUTHORIZATION FOR SALARY DEDUCTIONS**

(To be completed in duplicate)

I, no. .... rank.....name (CAPS) ....., an 'Ordinary Member' of the Estate Police Association, hereby authorize (name of company) .....to deduct from my wage/salary 'dues' in the sum of fifty dollars (\$50.00) monthly; or twenty-three dollars and eight cents (\$23.08) fortnightly; or eleven dollars and fifty-four cents (\$11.54) weekly, whichever is my pay period, and forward those deductions to the Estate Police Association.

Additionally, I consent to any future increase or decrease in 'dues' to be automatically deducted from my salary and paid to the Association via the existing salary deduction arrangement, upon notice by letter from the Association's National Executive of such.

.....  
Member Signature                      Employee No.                      Witness                      Date

*This copy to be stamped by Company and returned to the EPA*



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