



ADDRESS:.....
POSTAL:.....
TEL/CELL:.....
EMAIL:.....

ATT: Secretary General

Dear Sir/Madam

AUTHORISATION OF DEDUCTION FROM SALARY

I Identity No.
being a member of the Botswana Doctor's Union authorize you to deduct P340.00 from my salary to
cover my membership subscription.
This authorization takes effect from (month) and shall continue
in force until cancelled in writing with 3 (three) clear month's notice.

Payroll No:

BHPC number:

Date to start:

Gender:

ID number
(omang/passport):

Date:

Signature:

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