



## Salary Deduction Cessation Authority

To \_\_\_\_\_  
Paymaster: \_\_\_\_\_

Please cease housing advance salary deduction of K\_\_\_\_\_ for Employee: \_\_\_\_\_

Employer No: \_\_\_\_\_ commencing PPE: \_\_\_\_\_ in respect of the above employee who had paid housing

Allowance in full/never obtained housing advance.

**(\*Delete which is applicable)**

Dated this: \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

For and on behalf of **NAMBAWAN SUPER LIMITED.**

\_\_\_\_\_  
**Contributions Officer**

