

CHANGE OF PAYMENT MANDATE - PAYROLL

Name _____ Membership No. _____ Reg / Payroll No. _____

Address _____

Post Code _____

I hereby authorise the Finance Department of _____ Police to alter the
deduction from my salary for the credit of SPCU Ltd as follows.

My Payments

Payment	From	To
Membership Account	£ _____	£ _____
Saverplus Account	£ _____	£ _____
Kidzplus Account	£ _____	£ _____
Loan 1	£ _____	£ _____
Flexiloan	£ _____	£ _____
Special Loan	£ _____	£ _____
Entitled Member(s)	£ _____	£ _____
Family Protection Plan	£ _____	£ _____
Total	£ _____	£ _____

Signature _____

Date ____ / ____ / ____

My Entitled Member's payments

I hereby request that my Credit Union payments be
altered as below, subject to my enabling member
giving authority for the consequent alteration to
his/her salary deduction.

Payment	From	To
Membership Account	£ _____	£ _____
Saverplus Account	£ _____	£ _____
Loan 1	£ _____	£ _____
Flexiloan	£ _____	£ _____
Special Loan	£ _____	£ _____
Family Protection Plan	£ _____	£ _____
Total	£ _____	£ _____

Signature _____
(Entitled Member)

Date ____ / ____ / ____

OFFICE USE: 1st Check: _____ 2nd Check: _____ Date to FD: ____ / ____ / ____

Pay run No: _____ To FPP Officer: _____