**Payment Authority**

I hereby authorise UCC to deduct from my wages/salary each week/month,

the sum of euro with immediate effect.

I further authorise UCC to pay over the amount deducted to the Treasurer of

the Cork-Singida Partnership at UCC.

I understand this authority may be revoked by me, in writing, at any time.

**Name**

**Dept/Unit**

**Email**

**Signature\***

**Date**

Please return this form as an email attachment to payrollqueries@ucc.ie

(In the event that I am already a member, this authorisation prevails over

any previous authorisation).

\* Signature not required if the form is sent from a UCC email address