

Salary cessation order for Employee Voluntary Contributions

To: OIC Staff and Salaries

Payroll year: _____

Payroll date: ___ / ___ / ___

This form is issued to your pay office after approval and stamped by Nambawan Super Limited. This order will remain in force until altered or cancelled by NSL and shall replace all previous inceptions lodged by NSL.

Employee Details

Surname																				
Given Name																				
Payroll No.																				

Cessation Request to Paymaster

Please cease from my Salary the sum of K _____ contributed as voluntary contributions.

Employee's signature: _____
(As per copy of letter attached)

Date: ___ / ___ / ___

Location: _____

Deduction Code	Description	PGK	Amount per f/n					
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px 5px;">B</td> <td style="padding: 2px 5px;">P</td> <td style="padding: 2px 5px;">O</td> <td style="padding: 2px 5px;">S</td> <td style="padding: 2px 5px;">V</td> </tr> </table>	B	P	O	S	V			
B	P	O	S	V				

Action Officer's Name:

Reason for variation:

Signature:

Date:

Authorised:

Date: ___ / ___ / ___

Employer use Only

Staff section/Accounts Section

Checked by: _____

Date: ___ / ___ / ___

Approved by: _____

Date: ___ / ___ / ___

Data Entry Use Only

Data Entered: Date ___ / ___ / ___

For Pay Period #: ___ / ___ / ___

Entered by: _____

Signature: _____

Official Stamp

