



Winchester Business Centre, 15 Hope Road Kingston 10
Tel 920-0030-33 Fax 968-6627

Salary Deduction Authorization

Ministry of National Security
2 Oxford Road, 3rd Floor
Kingston 10.

Name of Employee: _____ Location: _____

Employment # _____ Regulation # _____ Rank: _____ TRN: _____

Please deduct from my salary the sum of _____
_____ (\$ _____)

Effective: 1st _____ and make payments to Orion Insurance Brokers and not

The Ampol Plan.

This authorization shall remain in place and may be cancelled by Orion Insurance Brokers

Signature of Employee & Date

Employer's Approval

JCF () DC ()



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