POLICIES FOR ASSOCIATES PAYMENT INSTRUCTION WAIVER



Authorisation for Payroll P	ayments to be made to another Payee	
A -1 -1		
NI Number:		
to the Written Statement of	Consultancy Limited ("Search") to make any payments of Particulars of Employment, signed by me and dated esulting from work performed for clients of Search, or or	·
Address of Payee:		
Name of Bank: Bank Branch: Sort Code of Bank: Bank Account No: Building Society Roll Nu	// Imber (if applicable)	
This instruction is to rema	in in force from the date of this instruction.	
claimants against my asse	on is not an attempt to disadvantage any of my creditorets. I also confirm that this instruction only relates to the way affects any deductions that are properly made in a	e actual payment of
•	against any and all claims and resulting costs, penalticular sult of this instruction whether asserted against Search or others.	
Signed: Dated: WITNESSED - Signed: Dated: Name: Address:		