



authority to deduct from salary



I hereby authorise the Pay Branch Victoria Police to deduct
the amount of 0.1% or 0.15% or 0.2% *(please tick)*
from my fortnightly salary and pay to the **Victoria Police Legacy Scheme (Inc.)**
121 Cardigan Street, Carlton Street, Carlton VIC 3053.

Name

Rank

Reg. No.

Date

Employee No.

Please complete and forward to the
Corporate Payroll Unit, HRDD, DX21 0064.

Victoria Police Legacy Scheme (Inc.)

Address PO Box 537 Carlton VIC 3053

Phone 03 9347 5194 **Fax** 03 9349 2810

Toll Free 1 800 065 999 **Mobile** 0418 991 597 **DX** 211383

Email info@policelegacyvic.org.au **Website** www.policelegacyvic.org.au