

# XXX Company

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**To: Human Resource Department**

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## SALARY DEDUCTION FORM

I, the undersigned, hereby authorizes (ABC Company) to deduct HK\$\_\_\_\_\_ from my gross earnings in (Month – Year) payroll / each payroll period beginning (Month-Year), the following:

In payment for:	Amount
Medical Short-fall _____	HK\$ _____
Medical Insurance premium _____	HK\$ _____
Staff Loan _____	HK\$ _____
_____	HK\$ _____
_____	HK\$ _____
_____	HK\$ _____
	Total HK\$ _____

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
Staff Name \_\_\_\_\_ Staff No. \_\_\_\_\_  
Department \_\_\_\_\_

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### HR Department Use Only:

Entered by \_\_\_\_\_ Date: \_\_\_\_\_  
Checked by \_\_\_\_\_ Date: \_\_\_\_\_  
Approved by \_\_\_\_\_ Date: \_\_\_\_\_