



BEAUSOLEIL BROADBAND INC. AUTHORIZATION FOR PAYROLL DEDUCTION



EMPLOYEE NAME:			
PROGRAM :			
PAYMENT AMOUNT:	\$	Bi-Weekly	CHECK ONE
		Monthly	
START DATE FOR DEDUCTION:			
END DATE FOR DEDUCTION:			
COMMENTS OR SPECIAL INSTRUCTIONS:			

AS A BEAUSOLEIL FIRST NATION EMPLOYEE, I HEREBY AUTHORIZE THE BEAUSOLEIL FIRST NATION PAYROLL CLERK TO DEDUCT MY INTERNET PAYMENT DIRECTLY FROM MY PAY:

x

Employee's Signature	Date
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x

BBI Representative's Signature	Date
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