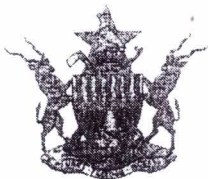


The Pensions Master
PublicServiceCommission
Pension Agency
P.O.BoxCy 397
Causeway
HARARE.



PUBLIC SERVICE COMMISSION

Annexure C



EXTERNAL DEDUCTIONS FORM

PAYABLE TO:-

DEDUCTION

(NAME OF THE ORGANISATION)

SURNAME

FIRST NAME

NEW

ANGE

ELETE

CODE

MONTHLY AMOUNT

START DATE

END DATE

REFERENCE NUMBER.

NATIONAL ID NUMBER.

(Attached copy of the national ID)

THUMB PRINT

Applicant's signature

Approved

Date

NOTE: FORM TO BE COMPLETED BY APPLICANT IN HIS OWN HANDWRITING.