

Payment cancellation form

Employee name:

Employer name: NCB No.
(office use)

Details of regular payment to be cancelled

Who is the account paid to?:

Last payment to be made on: / /

Payment made via (EFT/BPAY/Other):

Amount of payment: \$

Please note:

- ▶ This form is used to cease existing regular payments
- ▶ If you are continuing to salary package, please ensure you have setup a New Payment Request for your salary packaging fund to be sent to (assuming you need a new payment setup).
- ▶ This will not cease your salary packaging deduction through payroll.
- ▶ Your cancellation Request Form must be forwarded to CBB at least 5 working days prior to payment date.

Employee signature: Date: / /