

**AUTHORITY TO DEDUCT**  
(Additional Membership Savings)

I, \_\_\_\_\_ with Pag-IBIG MID No. \_\_\_\_\_ and whose signature appears below, hereby authorize my employer, \_\_\_\_\_ to deduct from my monthly salary the amount of \_\_\_\_\_ (P\_\_\_\_\_) beginning, \_\_\_\_\_ representing my additional membership savings (MS) for Pag-IBIG I which is over and above my mandatory MS, and to remit the same to Pag-IBIG Fund.

It is understood that this authority to deduct shall continue to be effective during employment with your company or until revoked in writing by the undersigned.

\_\_\_\_\_  
Signature over Printed Name

**CONFORME:**

\_\_\_\_\_