

FIJIAN TEACHERS ASSOCIATION HOUSING ASSISTANCE SCHEME DEDUCTION FORM SYSTEM CODE 256

Education House, 68 Knollys Street, Suva, GPO Box 14464, Telephone: 3318156/3315099 Mobile: 7084301 Fax: 3318157/3304978

	authorize the Principal
Accountant of the Ministry of Education to deduct	[\$]
Every fortnight from my salary and pay the same t	o FTAHAS subscription.
Ciornateuro	Date
Signature	Date
Witness Name	Designation
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FTAHAS Stamp	
This authority shall not be varied or cancelled without the written consent of the General Secretary of the Fijian Teachers Association.	
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