**REQUEST FOR PAYMENT OF EMPLOYEES OBLIGATIONS FROM THEIR WAGES**

Employee: **..........................................................**

Address: ..........................................................

Date of Birth: ..........................................................

Personal Number: ..........................................................

Employer: **Technical University of Liberec** IČ: 46747885

Studentská 1402/2, 461 17 Liberec 1

1. For the duration of the employment relationship with the employer, the employee acquires a monthly monetary claim in the form of wage, which is payable within the pay date set by the employer.
2. The employer has a monetary claim (as specified below) against the employee, which shall be due in the calendar month following the month in which the employee became entitled to wage:

**dining services for employees**

(deductions for lunches, shopping in the canteen, food vouchers, etc. corresponding to the monthly balance of the employee’s diner’s account registered at <https://menza.tul.cz/> or in the case of food vouchers according to the entitlement to the food vouchers)

**payment for private telephone calls**

(based on the monthly statement of telephone account registered at <https://volani.tul.cz/>)

mobile phone number: **.........................** mobile phone number: **.........................**

mobile phone number: **.........................** mobile phone number: **.........................**

**payment for rent** (on the basis of a concluded accommodation or lease contract and a valid price list)

employee accommodation in Dolní Hanychov

employee accommodation building „P“ v Komenského St.

employee accommodation in Brožíkova St. no. 376

employee apartment

**payment for kindergarten for a child:** .................................................................

(on the basis of a concluded contract on the placement of a child to MŠ ŠkaTULka)

**payment for babysitting in TUL day-care centre** (on the basis of a monthly bill)

**other .....................................................................**

1. The employee hereby makes a declaration of the set-off of their claim referred to in point 1 against the employer's claim specified in point 2, which the employer has against the employee in the amount of the monthly statement of the above benefits. By offsetting, both receivables are cancelled monthly to the extent by which they overlap.
2. The first set-off will take place in the month of ...................... 20.... and will then take place until the employee terminates their employment at TUL or cancel this request.
3. If it is not possible to set off the amount owed by the employee, the employee will pay the amount in cash at the cash office of the employer, or according to the agreement with the employer in another form, until the next payment date.
4. The employee's request for set-off of mutual claims is registered in the payroll accounting office.

In Liberec dated **......................**

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Signature of the employee

The request delivered to the payroll accounting office on:.......................

Signature of the payroll accounting office employee: .........................