| | Date: | | | | | | |
|--------------------------------|---|---|-------------------|---------|---|----------|--|
| S | To: | Company: Department: Address: | | | | | |
| gicor | | 1 | - | | | | |
| se Finencial Thinking for Life | From: | Name: Department: | | | | | |
| | Dear Sir | /Madam, | | 2.884 | *************************************** | | |
| | Please ca | ause the sum of \$ | = | (Words) | | | |
| | dollars deducted each month from my salary for payment to:- | | | | | | |
| | | SAGICOR LIFE INC. P. O. BOX 284 16 QUEENS PARK WEST PORT OF SPAIN | | | | | |
| | First pay | First payment to be in respect of my salary for the month of: | | | | | |
| | for payment to the following: | | | | | | |
| | GT2204 | Number(s): | On the Li | fe of: | Amount: | | |
| | | 6: | | | | _ | |
| | | Sign | nature of Client: | | | <u> </u> | |
| | | | | Date: | | 26 | |