



Medical and health services cooperative credit unions

Kanifing Institutional Area – Kanifing, The Gambia, West Africa

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MEDICAL AND HEALTH SERVICES

COOPERATIVE CREDIT UNION

STANDING ORDER

To: Principal Accountant

Date.....

I Authorize you to make a monthly payment of D:.....

In words:.....

.....

I authorised the treasurer to deduct directly from my salary the loan repayment installments together with interest and charges for late payment.

TO: MEDICAL AND HEALTH SERVICES CREDIT UNION on the ending of each month.

Commencing.....

Please charge such payment to my salary.

Yours faithfully

Signature:

Name:

Designation:

Paying slip No:

INSTRUCTION TO CANCEL OR VARY THE ABOVE PAYMENT MUST BE IN WRITING AND SUCH NOTICE GIVEN IN SUFFICIENT TIME TO SHOW THE PAYING OFFICE TO BE COMMUNICATED WITH.