

**GOVERNMENT SERVICES EMPLOYEES ASSOCIATION
(FORMERLY GOVERNMENT SERVANTS' ASSOCIATION)**

PROVIDENT FUND

LOAN AGREEMENT FORM

LOAN NO:.....
SURNAME: MR/MRS/MISS:.....
NAME:..... MAIDEN NAME:.....
MINISTRY/DEPARTMENT:.....
SECTION/PLACE OF WORK:..... CODE NO:.....
POST HELD:.....
OFFICER'S NUMBER:..... PAYSITE NO:.....
MONTHLY SALARY:..... N. IDENTITY NO:.....
DATE OF BIRTH:..... AGE:..... TOTAL DEDUCTION:.....
RESIDENTIAL ADDRESS:.....
.....
PHONE (OFFICE):..... RESIDENCE:.....
LOAN AMOUNT:..... REFUND PERIOD:.....
INSURANCE PREMIUM AMOUNT:..... PREMIUM PAID ON:.....
INTEREST RATE:..... MONTHLY INSTALMENTS:.....
FIRST MONTH INSTALMENT:..... LAST MONTH INSTALMENT:.....
GUARANTOR:.....

I hereby certify that the above information is true and correct and agree to have taken cognisance and to abide by the rules of the G.S.E.A. Provident Fund and By Laws for loans, including policies. I bind myself to request to the Account General to deduct from my monthly salary by check-off, for any reason whatsoever, I bind myself to authorise the Account General to deduct my outstanding amount (capital, interests & surcharges) from any gratuity and/or pension accruing to me. I also agree that the agreement for repayment of the loan is irrecoverable.

DATE:.....

SIGNATURE:.....

CERTIFYING OFFICER:.....

SIGNATURE:.....