

FOR OFFICIAL USE ONLY

JR#/RECEIPT #: _____ AMT. \$: _____ DATE: _____

TRANSFERS TO AS FOLLOWS:

DR. H.P. DEPOSITS/DEPOSITS	CR. H.P. LOANS	\$ _____	} JR#
DR. H.P. LOANS	CR. INT. ON H.P. LOANS	\$ _____	

AMOUNT APPLIED FOR	\$ _____	DATE: _____
LESS: AMOUNT DEPOSITED	\$ _____	
SUBTOTAL	\$ _____	
ADD: 5% SURCHARGE	\$ _____	
LOAN PRINCIPAL	\$ _____	

Monthly Repayments \$ _____ at One Percent (1%) on the unpaid balance as at the month before:

PAYMENTS TO BE DISBURSED AS FOLLOWS:

Payable to _____	Amount \$ _____
Cheque No. _____ C.V. No.: _____	Date: _____
Payable to _____	Amount \$ _____
Cheque No. _____ C.V. No.: _____	Date: _____
Payable to _____	Amount \$ _____
Cheque No. _____ C.V. No.: _____	Date: _____

APPROVAL BY CREDIT COMMITTEE

This loan was approved / not approved by the Credit Committee members at its meeting held on _____

Payments should be disbursed as indicated above.

Payments to be made on _____.

CREDIT COMMITTEE

..... (Chairman) (Secretary) (Member)
..... (Member) (Member) (Member)

BOARD OF DIRECTORS

..... (President) (Vice - President) (Treasurer)
..... (Secretary) (Member) (Member)