

THE MAURITIUS CIVIL SERVICE MUTUAL AID ASSOCIATION LTD.

Business Registration Number: C10000071

PAYMENT OF LOAN – PART / FULL

1.0

From : Dept. To : **Cash Office** Date :**RE : ACCOUNT MR / MRS / MISS**.....Customer Code :

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 Department :NID No. :

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 (*mandatory*)

Occupation :

1.1

A. PART PAYMENT ON LOANPlease receive the sum of rupees
from the abovenamed being **part-payment** on loan (loan abatements for months ofto).

Sn.	Loan	No.	Total Amount to be paid * (Rs)
1	Personal		
2	Quick		
3	RSF		
4	Educational		
5	Spouse		
6	Other		
TOTAL (RS)			

Loanee's Options (either / or) :- (Tick as appropriate)

1 To change monthly repayment (EMI).

2 Keep monthly repayment (EMI) constant.

Signature of Customer: Date :

1.2

B. FULL PAYMENT ON LOAN						
Sn.	Loan	No.	Capital (Rs)	Accrued interest (Rs)	Any amount due (Rs)	Total Amount to be paid * (Rs)
1	Personal					
2	Quick					
3	RSF					
4	Educational					
5	Spouse					
6	Other					
TOTAL						

** Please note that this figure is valid up to date of issue.*

I agree to pay the sum of Rs..... in settlement of my loan (s).		
Name of Customer:	Signature of Customer:	Date :

2.0

If payment is being done by 3rd party																
Relationship with client:																
Name of third party																
NIC No. (To attach copy of NIC).	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td><td style="width:20px;"> </td> </tr> </table>															
Source of Fund																
Signature of third party: Date :																

3.0

C. OFFICE USE

DEBTORS SECTION / CUSTOMER SERVICE / DEPOSITS SECTION	
Is customer / third party a 'PEP' ?	YES : <input type="checkbox"/> NO: <input type="checkbox"/>
Black list checked (third party) :	YES : <input type="checkbox"/> NO: <input type="checkbox"/>
Name:..... Signature: Date:.....	
<u>PEP Transaction authorized by (Senior Management)</u>	
Signature: Date:...../...../.....	

	<i>CASH OFFICE POSTING BY</i>		<i>DEBTORS SECTION POSTING BY</i>		<i>REVIEWED BY SOO (DEBTORS) / ASST. MANAGER (DEBT RECOVERY)</i>	<i>EXAMINER</i>
	<i>Name</i>	<i>Signature</i>	<i>Name</i>	<i>Signature</i>		
<i>Maker</i>					Name:	Name:
<i>Checker</i>					Signature:	Signature:
<i>Date</i>					Date:	Date:

RR/SB/22.3.18