



Date

DD	MM	YYYY
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**The Manager
Standing Order Department**

Bank Name:

Branch Name:

Branch Address:

Dear Sir
Please credit the Bank Account No.: **000011814470** of **Medscheme (Mtius) Limited** at the **Mauritius Commercial Bank Limited (Head Office)** as per below:

First Payment	Rs(Figures) (Words)
Subsequent Payment	Rs(Figures) (Words)

The **first** payment is due on the or on any date after receipt of this standing order.
Subsequent payments are due on the **1st** day of each month until

Name and Address of Client

Name of Client:

Address of Client:

Client's Bank Acc. No:

Ref. No:

.....
1st Signature

.....
(in case of joint a/cs)
2nd Signature

Special Instructions (Optional)

I/ We also agree that Medscheme (Mtius) Ltd may query about any premiums outstanding/ not yet paid by the due date or any facts affecting this Standing Order in anyway.

.....
1st Signature

.....
(in case of joint a/cs)
2nd Signature

Please make sure that your signature corresponds with the specimen held at your bank and any amendments made on the form should be countersigned.



Call us on
403 5076
for more details