






BANKER'S ORDER

TATIL Life Assurance Limited

P.O. Box 1004 | 11 Maraval Road, Port of Spain 190131, Trinidad and Tobago, W.I.
 T: 868-62TATIL (628-2845) | E: life@tatil.co.tt | W: www.tatillife.co.tt   

TO: THE MANAGER

FROM: _____
 BLOCK LETTERS

BANK: _____

ADDRESS: _____

ADDRESS: _____

RE: Account No: _____

PLEASE CANCEL ANY PREVIOUS STANDING ORDERS

Please pay:

REPUBLIC BANK LIMITED, Independence Square, Account No: 150-279-126-701

RBC ROYAL BANK, Independence Square, Account No: 100004017839562

For the credit of TATIL LIFE ASSURANCE LIMITED the sum of _____ dollars
 and _____ cents on the _____ day of _____ 20____, and a similar sum on
 the _____ day of each _____ thereafter until further notice, and debit my account above.

POLICY NUMBER	NAME	AMOUNT
In the even there is a difference of within one dollar in the amount calculated: I/we hereby authorize TATIL LIFE ASSURANCE LIMITED to make such adjustments in the block below.	TOTAL \$	

\$ _____

Signature: _____

Date: ____/____/____
 DD/MM/YYYY

Agent's Name: _____ No: _____

