



# Ideal Finance Corporation Limited

17 Ripon Road, Kingston 5, Jamaica W.I.  
Telephone: (876) 960-6390-4 Fax (876) 960-6816

## SALARY DEDUCTION FORM

TO: \_\_\_\_\_

DATE: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

In consideration of an AGREEMENT between **IDEAL FINANCE CORPORATION LIMITED**, I \_\_\_\_\_ hereby give the irrevocable order for the allotment from my salary on a weekly/fortnightly/monthly basis, the sum of \_\_\_\_\_ Dollars \_\_\_\_\_ Cents (\$ \_\_\_\_\_) in favour of the above Company commencing the month of \_\_\_\_\_ 20\_\_\_\_ and I further request that the sum so allotted be remitted to offices at 17 Ripon Road, Kingston 5, Jamaica.

**THIS ORDER SUPERCEDES ALL PREVIOUS ORDERS AND REMAINS IN FORCE UNTIL YOU ARE ADVISED BY THE SAID COMPANY THAT IT IS REPLACED BY ANOTHER ORDER OR THAT THE ALLOTMENT SHALL CEASE. THIS ORDER IS APPROVED BY IDEAL FINANCE CORPORATION LIMITED AND SHALL BE RESCINDED WITH THE APPROVAL OF THE SAID COMPANY.**

\_\_\_\_\_  
Applicant's Signature

DATE: \_\_\_\_\_

\_\_\_\_\_  
Authorized Officer of Company

\_\_\_\_\_  
STAMP/SEAL

DATE: \_\_\_\_\_

\_\_\_\_\_  
Authorized/Credit Officer of IFC

DATE: \_\_\_\_\_

### IDEAL FINANCE CORPORATION LIMITED (Company Use Only)

ACCOUNT NO	ACCOUNTS TO BE REMITTED	AMOUNT

\_\_\_\_\_  
Allocation Officer Acknowledgement

DATE: \_\_\_\_\_

\_\_\_\_\_  
HEAD OF ACCOUNTS DEPARTMENT