GROUP MULTIPLE BENEFIT INSURANCE SCHEME
SKIM INSURANS BERKELOMPOK PELBAGAI MANFAAT

Great Eastern
A member of the OCBC Group

Branch code *Kod Cawangan*		Employer code *Kod majikan*	
Contract Type *Jenis Kontrak*		GS NO.	
Contract No *No. Kontrak*		Client No. *No. Pelanggan*	

AUTHORISATION LETTER FOR DEDUCTION FROM SALARY AS PREMIUM CONTRIBUTION FOR GROUP MULTIPLE BENEFITS INSURANCE SCHEME
SURAT PEMBERIAN KUASA PEMOTONGAN GAJI SEBAGAI PEMBAYARAN PREMIUM UNTUK SKIM INSURANS BERKELOMPOK PELBAGAI MANFAAT

GS _____

TO: HR DEPARTMENT OF _____

I, _____ , IC NO _____ hereby authorize
Saya *No. KP* *dengan ini memberi kuasa*

to deduct from my monthly salary each month the following premium as contribution under GS No. _____ and continuously every month
untuk memotong dari gaji bulanan saya untuk skim *setiap bulan sehingga*

hereafter until otherwise advised by me in writing to Great Eastern.
diberitahu kelak secara bertulis ke Great Eastern

	NRIC/ BIRTH CERT NO. *NO K/P/ NO. S.BERANAK*	NAME *NAMA*		MONTHLY PREMIUM *PREMIUM BULANAN*
1) Member *Ahli*			RM	
2) Spouse *Pasangan*			RM	
3) Child1 *Anak 1*			RM	
4) Child2 *Anak 2*			RM	
5) Child3 *Anak 3*			RM	
6) Child 4 *Anak 4*			RM	
		Total Deducted Amount *Jumlah yang dipotong*	RM	

Signature of member *Tandatangan Ahli* _____ Date *Tarikh* _____

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