

**AUTHORITY TO DEDUCT
THROUGH THE DEPED AUTOMATIC PAYROLL DEDUCTION SYSTEM (APDS)**

I hereby authorize **DepEd** to deduct monthly from my salary, through the **DepEd APDS**, the sum of **PESOS:** _____ (P_____) Inclusive of principal and interest, beginning on to _____ and ending on _____ and remit the same to **ETIQA LIFE AND GENERAL ASSURANCE PHILIPPINES, INC.** (formerly **ASIANLIFE & GENERAL ASSURANCE CORP.**) in consideration of the loan which was granted to me on _____.

The authorization is **VALID AND BINDING** within the aforementioned loan period, unless the loan is pre-terminated, or the authorization is otherwise revoked. Moreover, I agree that deductions that will reduce my monthly net take-home pay to lower than what is allowed under the law shall not be accommodated in the **APDS**. Such non-accommodation shall not extend the period of this authorization.

(Signature over Printed Name of DepEd Borrower)
Date: _____

PROMISSORY NOTE

For value received, the undersigned promises to pay through **APDS** to **ETIQA LIFE AND GENERAL ASSURANCE PHILIPPINES, INC.** (formerly **ASIANLIFE & GENERAL ASSURANCE CORPORATION**) the sum of **PESOS:** _____ (P_____) with interest rate of _____ percent (_____ %) per annum, **TO BE PAID IN EQUAL MONTHLY INSTALLMENTS, INCLUSIVE OF PRINCIPAL AND INTEREST IN THE AMOUNT OF P_____ . BEGINNING ON _____ AND ENDING ON _____ .**

Default in the payment for six (6) consecutive installments, shall render the entire unpaid balance due and demandable.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____ at _____ .

(Signature Over Printed Name of Borrower)

Employee No. _____ Div. No. _____ Sta. No. _____
School or Station Address: _____
Home Address: _____

ID No. _____
Date Issued: _____
Place Issued: _____
Telephone No. _____

Subscribed and sworn to before me, this _____ day of _____ 20_____, the affiant identified as such person after presenting the following:

VALID ID	ID NO.	DATE AND PLACE ISSUED
_____	_____	_____
_____	_____	_____

NOTARY PUBLIC

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Series No. _____