



JAMAICA CIVIL SERVICE MUTUAL THRIFT SOCIETY

REPLACEMENT SURETY FORM

BORROWER'S INFORMATION

File #: _____

Name: _____

First

Middle

Last

Department: _____

Post & Salary: _____

Date of Last Loan: _____

Total on Last Loan: _____

OLD SURETY INFORMATION

File #: _____

Name: _____

First

Middle

Last

Department: _____

Post & Salary: _____

NEW SURETY INFORMATION

File #: _____

Name: _____

First

Middle

Last

Department: _____

Post & Salary: _____

Total signed for: \$ _____

OK to Sign: _____ YES _____ NO