

NAME OF INSURED PERSON

(Block Capital)

NATIONAL INSURANCE NUMBER

[Empty rectangular box for National Insurance Number]

ADDRESS

DATE

TO: The General Manager
National Insurance Scheme
Brickdam & Winter Place
Georgetown - Guyana

Dear Comrade

I shall be/have been residing with effect
from and therefore will be unable to attend the Post
Office or National Insurance Office for the purpose of encasing my National Insurance Vouchers.

Consequently approval is hereby sought from the National Insurance Board for the appointment of
..... of.....

(enter name of representative)

whose signature appears below as my representative in Guyana and I have enclosed Pension Order Book, with
vouchers number to to receive and give receipt on behalf of all
sums of money which may become due, owing and payable to me by the National Insurance Board and receipt given
by my representative shall be full discharge to the National Insurance Board, and Fund for such sums.

.....
Date Signature of Pensioner

NB: If pensioner cannot sign he/she should make
his/her mark which should be witnessed.
Mark of Pensioner:

Witness to Mark

Address of Witness.....

Date

SIGNATURE OF REPRESENTATIVE

DATE

I hereby declare that Comrades
..... and

Appeared before me today and signed their names in the space provided.
(Date)

.....
Senior Officer NIS/Consulate Officer

MUST BE SIGNED BEFORE A SENIOR OFFICER OF NATIONAL INSURANCE OR A GUYANA
CONSULATE OFFICER IN THE COUNTRY WHERE APPLICANT RESIDES.

Delete which is inapplicable