

SAVINGS AND LOAN ASSOCIATION OF GOVERNMENT AUDITORS, INC.

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Loan App #	LOAN A	Date:				
Consumption Loan) Medical/Health/ Wellness Loan	Educational Loan	Emergency Loan Capital Loan			
No. of months:		Amount:				
Last Name:	First Name	Middle Name:				
COA ID No.:	Position:	Age:	Date of Birth:			
Permanent Address:		Office Name/Address:				
Tel No./Mobile No.:	Email Address:	Net Pay:	Monthly Basic Salary:			
Mode of payment: [] deposit to bank LBP Branh/Account Numbe Other Bank Name/Branch/A			TIN No [] pick-up [] mailing [] mailing			
Information on Pending Administrati administrative/criminal case? [] Yes [] No	ve/Criminal Case – With pending	g If Yes, please state t	If Yes, please state the charge:			
Information on Service of Penalty un	der any Administrative/Criminal	If YES, indicate pen	If YES, indicate penalty and start/end of service Penalty:			
Case- Is serving/Will serve penalty? [] Yes [] No		Start:	End:			

I hereby certify to the correctness of the foregoing data. Also, I authorize the COA Accounting Office or SLAGA to deduct from my salary/capital contribution/dividend the installments due thereon under the conditions of the Promissory Note below. Moreover, I authorize SLAGA to deduct any cost relating to above modes of payment, such as bank charge, mailing fee, and fare cost.

Borrower's Signature

Note: Documentary Stamp Tax (DST) of P1.50 on each P200.00 or fractional part thereof for loan amount exceeding P250K shall be deducted from the loan proceeds, aside from the Service Fee of 2%, Collection Fee (for salary deduction) of 2% and Insurance Premium.

PROMISSORY NOTE OF THE BORROWER

In consideration of the loan of P ______ granted to me, I bind myself to pay the SLAGA the said amount under the following terms and conditions:

- a. The loan shall be paid in ______ equal successive monthly installment of P ______, each with interest of ___% per annum using the Effective Interest Rate (EIR) method.
- b. Any installments not paid when due shall bear a surcharge of 1% per month in addition to the usual interest on the principal without need of notice.
- c. In case of default in the payment of any installment, transfer to another office, resignation, or travel abroad, or leave without pay, the entire balance of the loan shall become immediately due and payable without need for demand/notice and the same shall automatically be deducted from my capital contributions and dividend, if not sufficient, shall be deducted from my salary (**Applicable to Regular COA Employees & Special SLAGA Employees Members only**).
- d. As a borrower, I assign and convey unto the SLAGA any amount due or that may be due me from SLAGA, or any money due me for whatever reason or cause, including my terminal leave benefits (subject to Authorization Letter (in affidavit form) to deduct all my financial obligations), or whatever may be due me from the COA, or any other government agency, as may be necessary to cover the settlement of the herein loan or balance thereof including interests and surcharges until the whole balance is fully paid. (Applicable to Regular COA Employees & Special SLAGA Employees Members)
- e. In the event that this obligation is not paid in accordance with the terms and conditions hereon, and the SLAGA is compelled to institute a court action to enforce collection, I agree to pay the costs of suit, venue of which shall be in any competent court in Quezon City.

Done in Quezon City, this ______, 20 _____, 20 _____,

BORROWER'S SIGNATURE

VERIFICATION OF EXISTING LOANS OF BORROWER WITH OTHER FINANCIAL INSTITUTIONS (FI) (to be filled up by the authorized representative of FI)

Financial Institution	Required Monthly Amortization	Actual Monthly Amortization	Loan Balance as of Verification	Status of Amortization	Verified By	
					Printed Name	Signature
PWA						
PHILGASEA						
CCU/CMC						
CREMC						