10,				
Manager,				
Bank of Bhutan Ltd. /Bhutan National Bank Ltd.,				
Thimphu: Bhutan				
Subject: Standing Instruction for remittance of HSWS contribution to				
Health Staff Welfare Scheme.				
Dear sir/Madam,				
I, the undersigned hereby authorize Bank of Bhutan Ltd/Bhutan National				
Bank Ltd. to set up standing Instructions on my account to transfer				
Monthly/Quarterly/Half-yearly/Yearly Nu (In words				
) as follows:				
DEBIT: FROM MY BANK ACCOUNT NO				
BANK NAME		BRANCH	1	
DANK NAME		DRANCH		
ACCOUNT HOLDERS NAME				
<b>CREDIT TO:</b> Health	Staff Welfare Scheme	Account N	0	
BANK NAME		BRANCH		
The SI shall remain valid till such time unless withdrawn with mutual consent of the relevant parties or resigned/transferred from service.				
Yours Sincerely				
Signature of the Account Holder				Date:
Name of applicant	client		•••	
Citizenship ID No.			••••	
Contact No				
(NB: All members are requested to complete the SI and forward to email;				
hswsmoh@gmail.com)				