## MINISTRY OF FINANCE LIFE CERTIFICATE

## PENSION TYPE NATIONAL IDENTIFICATION #

Teacher, Public Officer, Parliament etc

I		of		
SURNAME	OTHER NAME	ADDRESS		
do hereby dec	lare that			
of		ADDRESS		
Telephone #				
and signed his	name below:			
Signature of P	ensioner/ Thumb Mark: .		Date:	
Signature of C	Certifying Officer :		Date:	
Qualification:				
Witness to Th	umb Mark 1			
NOTE:	This declaration must be Pensioner resides or bej the Peace, Minister of 1	e made before an officer of the Guyanese fore a Notary Public, Commissioner of C Religion or the Manager of a Bank. <u>The c</u> being alive must be affixed.	Consulate in the Country in which the Daths, Head of Department, Justice of	
WARNING:	<b>ARNING:</b> Any person who knowingly makes statement or false representation for the purpose of obtaining payment for himself or some other person or furnished any document or information which he know be false in a material particular renders himself liable to prosecution.		nent or information which he knows to	
		MINISTRY OF FINANCE LIFE CERTIFICATE		
		PENSION TYPE NATIONAL IDENTIFICATION #	Teacher, Public Officer, Parliamer etc.	
IVonet			of	
SURNAME OTHER NAME			ADDRESS	
do hereby dec	lare that Mr/Mrs/Ms			
of		ADDRESS		
Telephone #		came before me thisday of	, 20	

and signed his/her name below:

NOTE: This declaration must be made before an officer of the Guyanese Consulate in the Country in which the Pensioner resides or before a Notary Public, Commissioner of Oaths, Head of Department, Justice of the Peace, Minister of Religion or the Manager of a Bank. <u>The official stamp of the person attesting to</u> the fact of the pensioner being alive must be affixed.

WARNING: Any person who knowingly makes statement or false representation for the purpose of obtaining any payment for himself or some other person or furnished any document or information which he knows to be false in a material particular renders himself liable to prosecution.