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The General Manager
National Insurance
P.O. Box 101135
Georgetown
Website: www.nis.org.gy.

Dear Comrade

Notification of Lost Benefit Payment Voucher

I, of
(Full name) (Address)

hereby report that Benefit Payment Voucher No. for the sum of
..... dollars (\$) was lost/not
delivered to me, and has not been cashed by me.

I solemnly promise that should I subsequently find or receive the said Benefit Payment Voucher
No

..... I will return the said Benefit Payment Voucher

No..... to the National Insurance Office at

....., and that I will not encash or attempt to encash it or cause
any other person to attempt to do so.

I understand that I may be prosecuted under the Laws of Guyana for any false statements,
representations or declarations I may make; and that I will be liable under the National Insurance
and Social Security Act, 1969, to repay any monies improperly paid to me.

Yours faithfully

.....
Signature

National Insurance Number

Witness to Signature

- 1. Signature
- Address
- 2. Signature
- Address