


SBC REQUEST FOR EMPLOYEE'S PAYROLL ADVANCE			
EMPLOYEE'S NAME DENNIS CLEETUS		EMPLOYEE NUMBER 8949	DATE 21-Mar-24
DEPARTMENT	LOCATION	DATE OF HIRE	AMOUNT KD 15/-
REASON FOR REQUEST Salary advance for medical treatment		THE FULL AMOUNT WILL BE DEDUCTED ON THE FIRST PAY PERIOD FOLLOWING PAYROLL ADVANCE	
EMPLOYEE'S SIGNATURE ✓ Dennis		APPROVED-ACCOUNTING DEPARTMENT	DATE
APPROVED - DELEGATED AUTHORITY	DATE	CASH RECEIVED BY	DATE
✓ 		✓ Dennis	
PROMISSORY NOTE			
ON DEMAND, FOR VALUE RECEIVED, I HEREBY PROMISE TO PAY SBC THE AMOUNT OF <u> KD 15/- </u> NOTICE OF PRESENTMENT FOR PAYMENT, NOTICE OF DISHONOR, NOTICE OF PROTEST, ARE HEREBY WAIVED.			
EMPLOYEE'S SIGNATURE ✓ Dennis			