## Mar Thoma Syrian Church of Malabar Ahmadi Parish - Kuwait P. O. Box 47730, Fahaheel - 64028, Kuwait - Telephone/Fax: 3716360

## AHMADI MAR THOMA PARISH WELFARE FUND (AMPWF)

	APPLICATION FORM	175E-10		
APPLICATION NO.	MEMBERSHIP STATUS FAMILY	$\subset$		
ATTEICATION NO.	SINGLE			
A. PARTICULARS OF THE		7.07		
1. Name in Full	2. Registration No.			
3. Area				
4. Prayer Group				
5. Present Postal Address				
6 Present Office	APPARANCE OF THE PERSON OF THE			

raditos						
6. Present Office Address		AND THE STATE OF T				
	Phone No(s): E-m:	ail:				
7. Residential Address in		AMAGE 21 (V. 2016) 22 (V. 100)				
Kuwait	Phone No(s): Mo	Phone No(s): Mobile No.				
8. Permanent Address in						
India	Phone No(s) in India:					
9. Occupation:	10. Monthly Income: K.D.					
B. DETAILS OF FAI	MILY/DEPENDENTS:					
	Name	Present Domicile Stan (Now in Kuwait or no				
1)	Wife	Yes No	S TOOL			
2)		Yes No	S-11-2-11			
3)		Yes No				
4)		Yes No				
AND RESIDENCE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	FATEMENT & DECLARATION:					
Reason For Requestin	g Loan:					
	The second secon					
The control of the co						
		(Use additional sheet if	required)			
Declaration:						
declare that I am not	he statement given above is true to the best of associated with any Church other than Mar a e amount of loan, if sanctioned, shall be promp	Thoma Syrian Church of M				
Place: Kuwait Date	e: Signature of Applican	it:				

NOTE: Attach copy(ies) of document(s), if any, justifying the applicant's above statement.

D. DETA	ILS OF	CERTIFY	ING/RE	COMMENDING PERSON			
1. Name in Full: 2. Registration. No.							
3. Area:			41		*:		
<ol><li>Prayer (</li></ol>							
Position in	Kaistha	na Samith	y:				
				me and I hereby certify that he/she deserve	s the requested loan		
to the best of my knowledge and belief, therefore, I recommend the application.							
				A.			
Place: Kuy	vait Da	ite:		Signature of Certifying/Recomme	nding Person		
E. DETA	ILS OF	FIRST GU	ARANTO	OR AND HIS/HER DECLARATION:			
1. Name i	AND DESCRIPTION OF THE PERSON.	***************************************	*****	2. Registration. N	in and the same of		
3. Area:				27 Hegisti ation, 1			
4. Prayer	Group:						
the second secon	and the second s	ice Addres	· e•				
	10000						
Present R	esidentia	l Address:		2.			
Tel: Offic	e:		Reside	nce: Mobile:			
Declaratio	n:						
I hereby co	venant t	hat in the e	vent of de	fault by the borrower Mr./Ms.	, the mount		
				maximum period of ninety (90) days from			
Place: Kuy	wait	Date:		Signature of Guarantor:			
E DETA	IT C OF	OFCOND A	CHADAN				
The second secon	and the second second	SECOND	GUARAN	TOR AND HIS/HER DECLARATION:	THE RESIDENCE OF THE PROPERTY OF THE PARTY O		
1. Name i	n run:			2. Registration. No.			
3. Area:	C						
4. Prayer		ice Addres	201				
rresent r	ostai/On	ice Addres	is:				
Present R	esidentia	al Address:					
Tel: Offic	e:			Residence:	Mobile:		
Declaratio	n:						
I hereby co	ovenant t	hat în the e	vent of de	fault by the borrower Mr./Ms	, the amount		
due shall b	e repaid	by me in fu	ill within	a maximum period of ninety (90) days from	the date of default.		
Place: Ku	wait	Date:		Signature of Guarantor:			
MODE O	CH40493047 515	Amount		FOR OFFICE USE OF	NLY		
(KD)	Date	(KD)	Date	Application Received on:			
				Application Approved/Rejected on:			
				Loan Amount Sanctioned.			
			-	Date:			
	-00000						
Received	K.D.	/K	uwaiti	(SIGNATURE OF V	ICAR/PRESIDENT)		
Dinars (Kuwaiii			uwani )	DUE DATE OF FINAL PAYMENT:			
Date:							
(SIGNATURE OF BORROWER)			Date:				
		WER)					
	manth Janes PAGUS	100 VA 100		in the second second			
(NAI	ME & S10	GNATURE	OF	(SIGNATURE OF TR	USTEE (FINANCE)		
WITNESS & DATE)				(SIGNATURE OF TR	COLEE (FINANCE)		