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ESTABLISHED 1946

UTILITY BILL AUTHORIZATION FORM

Date:

General Manager St. John's Credit Union Limited 4 Basra Street Belize City, Belize

Dear Manager,

Ι	of	
hereby give Mr./Ms./Mrs.		who is my (relationship)

______, authority to use my utility bill as confirmation that he/she resides at the below given address for the past ______ months/years.

My Address:

Accompanying this letter is my tangible Social Security Card and recent utility bill.

Signature _____

Print Name _____

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