SDC FINANCE LIMITED



IMPLEMENTATION OF SETTLEMENT PLAN AGREEMENT

Customer Account Name:				
Customer Account No:				
Address:				
Account Type:	Individual	Join	_t	Trust (ITF)
Account Type.	Corporate	_	rprise	Others
1 / Ma baraby confirm that		_		
I / We hereby confirm that I/We, in furtherance with the		_		
authorize you to make pay	_	-	-	-
dution20 you to make pay		odani dotano 1,7770 ne	ivo provided be	
2023 Deposit Refund	1 st 30% Payment (Full) Partial (50%)			
2 nd 30% Payment (Full)	Partial F	Final 40% Payment (F	Full) Partia	al 🗌
Mode of Payment: Mobile I	Money Payment	MTNTIGO _	TELECEL [BANK TRANSFER
Registered MoMo Name:			(amoun	its below GHS1,000)
Registered MoMo Number	:		(amour	nts below GHS1,000)
Bank:				
Bank Account Name:				
Bank Account Number:				
Branch:				
Dranen.				
Mandate 1:				
Signature		Date :		
(for Joint mandate accounts & Corporate accounts)				
Mandate 2:				
Signature		Date :		