

**MEMBERSHIP REQUEST SHEET  
FOR DEPED GSIS ACCOUNTS ONLY**

\_\_\_\_\_  
Date

The Chief  
Regional Payroll Services Unit  
Department of Education-Regional Office VI  
Duran St., Iloilo City

Dear Sir/Madam:

Please effect the following request/s from my monthly salary.

Nature of Request	Account Name	Account Code	Amount	Date of Effectivity	
				Start	End
( ) DEDUCT					
( ) STOP					
( ) ADJUST					

**LEGEND:**

Attached is a clear copy of my payslip.

Very truly yours,

\_\_\_\_\_  
**Signature over Printed Name**  
**Office Address** \_\_\_\_\_  
**Policy No.** \_\_\_\_\_  
**Employee No.** \_\_\_\_\_  
**Station No.** \_\_\_\_\_  
**Division No.** \_\_\_\_\_

<b>Account Code</b>	<b>Account Name</b>
0001	Regular Policy Loan
0002	Salary Loan
0021	Summer One Month Sal Loan
0026	Cash Advance Loan
0090	UOLI Premiums
0099	Emergency Loan Assistance
0108	Optional Policy Loan
0132	Consolidated Loan
0133	Ecard Plus
0186	CEAP Premiums
0704	Emergency Loan