

Mr.....

Managing Director

State Trading Organization Plc

Boduthakurufaanu Magu, Maafannu, Malé, 20345

Date:.....

Dear Sir,

I.....(name/address).....
(ID card no) hereby agree and take full responsibility to pay the amounts on the cheques issued
by(name/address)(ID card
no) who intends to buy goods on credit from your esteemed Company, in which case he faces
any circumstance where he would be unable to pay the amounts on the cheques.

Yours Sincerely,

.....

(contact no:.....)

[Company Stamp/fingerprint]