



A

SUBJECT TITLE

B

CANDIDATE NUMBER

C

EXAMINATION CENTRE NUMBER

D

DATE

Instructions to candidates

1. Before commencing answers to any questions, you must complete boxes **A to D** above.
Your name must not appear on this cover or anywhere on the examination script.
2. Start each new answer on a clean page and please use both sides of the paper. Do not write out the question, but ensure that each page is marked with the question number. Please use a blue or black ballpoint pen.
3. Account ledger templates are available at back of booklet for use with relevant questions.
4. Your candidate number must be inserted at the head of each page and on this cover.
5. Cross out any work which you do not want to be marked.
6. Hand this booklet to the invigilator.
7. Invigilators are responsible for ensuring that this booklet is returned to: Awarding Body Co-ordinator, Chartered Institute of Credit Management, The Water Mill, Station Road, South Luffenham, LE15 8NB

	EXAMINERS' USE ONLY
1	
2	
3	
4	
5	
Total	

Question no:

Candidate no:

Question no:

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