



BANDARI SACCO LTD

Online Form
Email: member@bandarisacco.co.ke
Website: www.bandarisacco.co.ke
Tel. no. (254) 722-002525/ 735-336685

FOSA SHARES CONTRIBUTION FORM

Date:

The General Manager

Bandari Sacco Ltd

Dear Sir/Madam,

I _____ Member no. _____

ID. No. _____ Mobile no. _____ Email _____

Request to commence my monthly deductions towards monthly Share capital of Kes _____ per month with effect from _____ until further notice.

Signature

Member's Name _____ Signature: _____

Employment No. _____

FOR OFFICIAL USE ONLY

Action by: _____ Signature: _____ Date: _____

Processed by: _____ Signature: _____ Date: _____

Authorized by: _____ Signature: _____ Date: _____

MB: For the variation to be effected in the succeeding month, this variation Form must reach us on or not later than end of current month and all variations are subject to mandatory minimum contribution.