



FAIDA LEO NA KESHO

P.O. BOX 1186-80304, TELEPHONE/FAX (+254-728-719329)
Email; info@qwetusacco.com
Wundanyi, KENYA

ACCOUNT REACTIVATION FORM

Account No.....

I/We hereby request that my/our above account which is inactive/dormant be reactivated.

The account has been inactive/dormant due to

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Mode of maintaining activated accounts

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When reactivated, I/We shall ensure that the same is operated as per the Qwetu Sacco's requirements

Full names

ID/Reg/Passport No

Authorised signatory (ies) as per Sacco mandate

1. Name: 2. Name:

Signature: Signature:

Date: Date:

3. Name: 4. Name:

Signature: Signature:

Date: Date:

FOR OFFICIAL USE ONLY

Positively identified Yes No

Please attach copies of identification documents used

Branch

CAPTURED BY: NameDate.....Signature.....

VERIFIED BY: NameDate.....Signature.....

AUTHORISED BY: NameDate.....Signature.....