

I/WE undersigned hereby apply to open a savings account to be style as follows:-				
My/ Our particulars are as detailed				
		MOB No		
NAME:	Identity No	MOB No		
NAME:	Identity No	MOB No		
NAME:	Identity No	MOB No		
Registration No				
Present Bankers	Branch			
P.O. BoxTo	.TownRegistered Office			
Physical Address				
DistrictLoc	cationSub Loc	ation		
Certified By				
	cost against any loss incurred or claim	at the discretion of the SACCO and hereby ms arising out of the account being closed		
Yours faithfully (FULL NAMES)),			
NAME:		SIGNATURE:		
NAME:	SIGNATURE:			
NAME:	SIGNATURE:			
NAME:	SIGNATURE:			
FOR OFFICIAL USE ONLY:				
ACCOUNT NO	DATE			
RECEIVED BY:	SIGNATURE			
DATA CAPTURED BY	SIGNATURE			
AUTHOURISED BY	SIGNATURE			

ASSOCIATIONS, COMMITTEE, SOCIETIES, GROUPS, ETC.

	DATE:	
THE BRANCH MANAGER QWETU SACCO LTD CS/2523		
Dear Sir/Madam,		
At a meeting held by		
at	on day of/	./ it was resolved that:
 A saving bank account be opened with 0 The SACCO be instructed to honor all v otherwise arranged, provided these with 	withdrawals from the savir	ngs account as long as it has funds, unless
NAME	ID NO	SIGN
In the following manner		
A list of names and specimen of signatures of the SACCO.The SACCO is advised in writing of an instructions remain in the force until res	y changes which may take	place in signing officials and that these
We now request you to open a savings account in account. We hereby agree to comply with the rule		
NAME:		
ADDRESS:		
MOBILE NO		
INTRODUCED BY:		OFFICIAL STAMP(DATED)
SIGNATURE		
NAME:		
MORII F NO		