



KANISA REGULATED NON-WDT SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LTD.

All Africa Conference Churches compound, Opp. Safaricom House, Waiyaki Way.P.O. Box 1225, 00606, Westlands, Nairobi, Kenya Tel: 0714-612049/0780612049

Email: kanisa@aacc-ceta.org or info@kanisa-sacco.org Website: www.kanisa-sacco.org

MEMBER SAVINGS SCHEME WITHDRAWAL FORM

(Complete this form in block capital letters)

**TO: The Chief Executive Officer,
Kanisa Regulated Non-WDT
SACCO Society, P. O. Box
1225-00606,
Nairobi, Kenya.**

IMembership.....do hereby
make an application to withdraw In Words.....
..... from my Savings.

Member's Signature..... Date.....

Personal Account Details

Full Names: ID No

Mobile Phone No.....E-mail Address:

Payment details EFT RTGS M-Pesa Cheque

Account Name.....Bank.....

Branch Account No.

Mobile Name (For Mpesa Only) Mobile No.

FOR OFFICIAL USE ONLY

CHECKED BY:

Staff Name.....

Designation

Signature

Date

CONFIRMED BY:

Name.....

Designation

Signature

Date

DISPATCH OF CHEQUE

Cheque No.....KSHS.....Date.....

Cheque Collected By:.....

ID NO.....SIGN.....