

KENCREAM SACCCO LIMITED

CHRISTMAS SAVINGS SCHEME

APPLICATION FORM

A. MEMBERS DATA.

1. MEMBERS NAME.....2. WORK STATION.....

3. Members Address..... 4. Employers Address.....

5. Member No..... 6. Payroll Number.....

7. Position in Employment..... AMOUNT

8. ID Number Ksh.....

9. Home District.....

10. Location..... Sub Location.....

11. Terms of service.....

12. Next of Kin

B. ACKNOWLEDGMENT

I declare that the foregoing particulars are true to the best of my knowledge.

Signature..... Date.....

C. OFFICIAL USE ONLY

The requested application to Christmas savings scheme has been approved /rejected

REJECTED

Because

Sign