

CHAI SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED

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BRANCH COMMITTEE MEMBER CLEARANCE APPLICATION FORM

To be eligible to vie for the position of Branch Committees, the elected delegates should complete this form and submit to our Secretariat Chai Sacco Offices.

Name:
ID. No
Branch:
Mobile Number:
Member Number:
Payroll Number:
Signature:
Date:
FOR OFFICIAL USE ONLY FINANCE DEPARTMENT
Deposits as at 31/12/2016
Shares as at 31/12/2016
HEAD OF FINACESignatureDateDate
LOANS SECTION Loans defaulted as at 31/12/2016
Loans in other financial institutions
CREDIT/BRANCH MANAGERSignatureDate