



CHAI SAVINGS AND CREDIT COOPERATIVE SOCIETY LTD
Head Office: Chai House, Ground Floor, Koinange Street.
P.O. Box 278 - 00200 City Square Nairobi Kenya
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SHARE CAPITAL APPLICATION FORM

PERSONAL DETAILS

FULL NAME			BRANCH:
PAYROLL NUMBER			MEMBER NUMBER:
STATION'S NAME			DEPARTMENT
ID NO.	MOBILE NO.		EMAIL:

No. of Shares (one share = Kshs. 20)

No. of Shares Amount Kshs. No. of Instalments

Mode of payment (tick as appropriate)

Cash Cheque Div./Reb. Standing order Payroll deduction

Deduction authority.

I _____ of ID No. _____ hereby

authorize you to deduct Kshs _____ from my salary/FOSA account and pay

Chai Sacco with effect from _____ until cancelled by myself.

Signature _____ Date _____

OFFICIAL USE ONLY

Effected by: _____ **Sign:** _____ **Date:** _____

Approved by: _____ **Sign:** _____ **Date:** _____