P.O. Box 30376-00100, Nairobi
Tel: 0771 632 443

SACCO MEMBERSHIP WITHDRAWAL REQUEST

The Administrator
Jumbo SACCO Society Ltd
NAIROBI

I do hereby request to withdraw my membership from Jumbo SACCO Limited w.e.f._____

this being my written notice. The reason for my withdrawal is _____

In accordance with Jumbo SACCO's By-Laws, I am FULLY aware that: A member may at any time withdraw from the Society by giving a written notice of ninety (90) days. No member will be allowed to withdraw from the Society before clearing all loan balances if any; and thereafter the notice period, a member shall be refunded his monies within 30 days.

I undertake to follow-up on the members whose loans I have guaranteed to ensure that I have been fully replaced. Otherwise, the Society will continue to hold on to my deposits until the loans guaranteed have been fully replaced/repaid.

PERSONAL ACCOUNT DETAILS:

FULL NAME..... STAFF No.....

ID No..... DEPARTMENT..... DUTY STATION.....

OFFICE No..... MOBILE No.....

EMAIL ADDRESS: .....

BANK ACCOUNT NAME.....

ACCOUNT No..... BANK ..... BRANCH .....

I hereby make an application to withdraw from the SACCO and agree to conform to Jumbo SACCO By-Laws and any amendment thereof.

Signature of Applicant *(within the box)*

FOR OFFICIAL USE ONLY

CHECKED BY:

Staff Name.....

Designation.....

Signature.....

Date.....

AUTHORISED BY COMMITTEE:

Name.....

Designation.....

Signature.....

Date.....