

UBORA REGULATED NON-WDT SACCO SOCIETY LIMITED

The Managing Director
Kenya Bureau of Standards
P. O. Box 54974-00200
NAIROBI

AUTHORITY TO MAKE DEDUCTIONS FROM MY SALARY

KEBS/HR NO. Loan No.....

(To be filled in **duplicate**) (Indicate against number 1 or 2 below or both if applicable)

I..... (Name) hereby agree to abide with the check off system adopted by “Ubora Regulated Non-WDT Sacco Society Ltd” therefore, authorize you to deduct as per the details below:

1. LOAN REPAYMENT: Cheque No(s)

Kshs..... (Words).....
towards loan repayment on granted loan of Kshs
plus interest per month with effect from..... until all monies owed to the Society are fully recovered.

2. DEPOSIT CONTRIBUTION:

Kshs..... (Words).....
towards savings with effect fromuntil further notice.

3. SHARE CAPITAL CONTRIBUTION:

Kshs..... (Words).....
towards savings with effect fromuntil further notice.

4. MEMBERS DETAILS:

Member’s Signature..... Date..... Member No.....
KEBS/HR NO. Department.....
Current Mailing Address

For Official Use (“Ubora Regulated NWDT Sacco Society Ltd.”)

ACCOUNTANT’S ENDORSEMENT

Name..... Signature..... Date.....

CHAIRMAN’S ENDORSEMENT

Name..... Signature..... Date.....