



KENBANCO HOUSE
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Kanyakla Wanyalo!!

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SHARES TRANSFER FORM

TRANSFEROR

The Management Committee
Jokanyanam Women Empowerment Sacco
Nairobi

I _____ (Full Names as they appear on identification document)

MEMBER NO _____ **ID NO/PASSPORT NO** _____

MOBILE PHONE NO: _____ **E-mail Address:** _____

Hereby make an application to transfer my Jokanyanam women empowerment sacco shares worth Ksh. _____ to the below undersigned member. I have made an official withdrawal from sacco giving 60 days' notice. And agree to pay Ksh. 500 transfer fee as per sacco by laws. The fees can be deducted from my monthly deposits.

Date: _____ Signature of Transferor _____

PS: PLEASE NOTE THAT YOU CANNOT TRANSFER YOUR SHARES AND REMAIN A MEMBER OF THE SACCO

TRANSFeree

I _____ (Full Names as they appear on identification document)

MEMBER NO _____ **ID NO/PASSPORT NO** _____

MOBILE PHONE NO: _____ **E-mail Address:** _____

Apply to purchase the above shares and receive the benefits arising thereof.

Date: _____ Signature of Transferee _____

FOR OFFICIAL USE ONLY

PREPARED BY and AUTHORISED BY MANAGEMENT COMMITTEE

Prepared by _____

(Staff Name)

Designation _____

Signature _____

Date _____

Authorised By _____

(Management Committee member name)

Designation _____

Signature _____

Date _____