

FARMERS CHOICE COOPERATIVE SAVINGS AND CREDIT SOCIETY LIMITED

APPLICATION FOR SHARES TRANSFER

COMPLETE THIS FORM IN BLOCK LETTERS

The Hon. Secretary
P.O. Box
.....

I hereby make an application for TRANSFER of my shares worth ksh. 20,000/- and shareholding/membership and any amendments thereof.

FULL NAME: MR. MRS. MISS

PAYROLL NO. TERMS OF SERVICE

ID NO. EMPLOYER

DATE OF EMPLOYMENT..... DEPARTMENT.

SECTION. MOBILE NO.....

POSTAL ADDRESS PHYSICAL ADDRESS.....

EMAIL ADDRESS

.....
Signature of Seller / applicant

.....
Transfer date

TRANSFERRED TO:

FULL NAME: MR. MRS. MISS

PAYROLL NO. TERMS OF SERVICE

ID NO. EMPLOYER

DATE OF EMPLOYMENT..... DEPARTMENT.

SECTION. MOBILE NO.....

POSTAL ADDRESS PHYSICAL ADDRESS.....

EMAIL ADDRESS

.....
Signature of Purchaser / recipient

.....
Transfer date

1. NOMINATED NEXT OF KIN

I, the undersigned, in the event of my death, whilst still a member of the society, hereby instruct the Society to pay all amounts due to me, less any debts, to the Society to the person named in this section. The name of the nominee can be given in a sealed letter. I understand that I may alter the name of the nominated next of Kin by filling in a subsequent nomination form (If below 18 years, nominate a guardian).

NOMINATED NEXT OF KIN (FULL NAME)

RELATIONSHIP TO THE APPLICANT

I.D. NO.

ADDRESS OF THE NEXT OF KIN

WITNESS:
.....

NAME

Signature of Purchaser

Signature

2. FOR OFFICIAL USE ONLY

- 1) NAMES OF TRANSFER OF MEMBERSHIP.....
MEMBERSHIP REGISTER NO.
- 2) DATE OF TRANSFER..... SECRETARY COMMITTEE SIGNATURE.....
FARMERS CHOICE SACCO MANAGER SIGNATURE.....DATE
- CHAIRMAN'S SIGNATURE DATE.....