

Balozi Co-operative Savings and Credit Society Ltd.



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Invest in secure hands

THE CHAIRMAN,
BALOZI SACCO LTD
P.O. BOX 11539 – 00400,
NAIROBI.

EKEZA SAVINGS PRODUCT FORM

(a) To be filled by the investor/member

I, M/No.....

Identity card number..... hereby wish to save in Ekeza Savings

Product under the following terms and condition:

1. Amount being invested is Ksh.....
(In words).....
.....
2. Duration for investment.....months (in words).....
3. Effective date for investment.....day, month ofyear.....

Signed by investor..... Date.....

For Official use only:

Interest rate applicable.....

Name of the officer.....

Signature of the Officer..... Date.....

Note:

1. The interest rates are per annum
2. If an investor does not apply for a refund when the amount is due, the SACCO will automatically roll-back the funds for the period in a (2) above.