

Mwalimu National
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Website: www.mwalimunational.coop



SHARES VARIATION FORM

I.....

TSC/PF.No.:..... MNO.:..... Institution/School:.....

Postal address:..... Code:..... Email:..... County:.....

Request you to increase/decrease my monthly Shares contribution from KShs._____ to KShs._____

Per month with effect from:..... 20..... until further notice.

I hereby on execution of this form as the applicant explicitly and unambiguously consents to the collection, use and transfer, in electronic or other form, of my personal data as described in this document by the Sacco for the purposes of assessing and executing this variation request and future analysis whether in electronic or other form.

Member's Signature:_____ Date:_____

Note: (i) For the variation to be effected in the succeeding month, this variation form must reach us on or not later than 10th of the current month;
(ii) The minimum shares contribution is KShs.1,000.00 per month.

FOR OFFICIAL USE ONLY

Action by:..... Checked by:..... Authorized by:.....

Sign/Date:..... Sign/Date: Sign/Date:

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