

VARIATION FORM



SHERIA SACCO SOCIETY LTD

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*TO BE FILLED IN TRIPLICATE

NAME:.....

MNO/PJ/PF:.....

EMPLOYER:.....

MOBILE NO:.....EMAIL.....

ADDRESS:.....

RE:INCREASE/DECREASE OF DEPOSITS/ SHARE CAPITAL/ LOAN DEDUCTIONS

I authorize you to increase/ decrease my monthly deposits/ share capital/ loan deductions to the society from Kshs.....to Kshs..... with effect from.....

SIGNATURE..... DATE.....

FOR OFFICIAL USE ONLY:

ACTION TAKEN BY :-

NAME.....DESIGNATION.....SIGN.....

W.E.F:.....

Verified By:

NAME:.....DESIGNATION.....

SIGNATURE:.....DATE.....