



# DEPOSIT FORM

## CLIENT'S DETAILS

Names: ..... Surname: .....  
..

Membership No: ..... Omang No: .....  
...

Gender: ..... Date of Birth: .....  
..

Postal Address: ..... Physical Address: .....

Tel: ..... Cell: .....

Email Address: .....

## **EMPLOYMENT DETAILS**

Employer/Ministry: .....

Department: .....

Village/town .....

Postal Address .....

Tel: .....

**SOURCE OF FUNDS:** .....

**PURPOSE OF FUNDS DEPOSITED** .....

**MODE OF FUNDS TRANSFER/DEPOSIT INTO THE SACCOS (EFT/BANK  
TRANSFER/DEPOSIT/ SWIPPING):** .....

**TOTAL AMOUNT DEPOSITED** .....

**Member/ Depositor's Signature:** ..... **Date:** .....

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## **FOR OFFICIAL USE**

Deposit/Proof of Deposit Received By: ..... Date .....

Signature: .....