



P.O BOX 7504 – 30100 ELDORET, TEL 0707-737161
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DEPOSITS/SHARE CAPITAL TRANSFER FORM

Please attach copies of national ID cards for both transferer & transferee

‘A’ TRANSFERER

I (NAME)..... PFNO.....MNO..... wish to transfer my :

(Please fill where applicable).

a) **Share Capital** of KES In words.....
.....

b) **Deposits** of KES In words.....
.....

Signature:..... Date.....

“B” TRANSFEREE

TO: NAME..... PFNO.....MNO.....

Signature:..... Date.....

“C” WITNESS

NAME.....

Signature:..... Date.....

OFFICIAL USE

Approved by: NAME..... DESIGNATION.....

Signature:..... Date.....

Transfer effected by: NAME..... DESIGNATION.....

Signature:..... Date.....