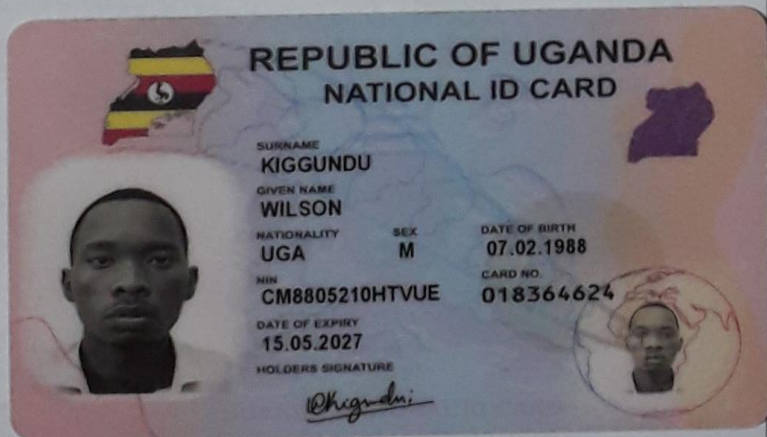


**INSTANT ACCOUNT OPENING FORM - DEMBE ACCOUNT****FOR CUSTOMER USE:****Customer Details**

Full Name (As per National ID) KELLY CLINTON  
 Date of birth 07/04/1995 Sex: Female ☐ Male ☒  
 National ID No CM95014101EWRH  
 Nationality UGANDAN Country of Residence \_\_\_\_\_  
 Customer's Mobile No 0783609071 Email Address \_\_\_\_\_  
 Next of Kin KULA SEDRICK Next of Kin Phone No. 0777287459

**Address** (Pick as shown on the ID)  
 Building Name Kamukama Plot No. X N/A Street N/A  
 Village Sipi Parish Chekuanda Subcounty Sipi  
 County Tingey District Kapchorwa P. O. Box N/A

**Employment Details:** Employment Type **Formal** ☒ **Informal** ☐ **Self Employed** ☐  
 Employer Name Saracen Position \_\_\_\_\_  
 If self-employed; Nature of Business \_\_\_\_\_  
 County Lugogo District Kampala  
 Source of Income Salary Monthly Income (Gross) 200.00

**Place National ID Card****BACK****Declaration**

By signing below, I/We agree that I/We understand the terms and conditions of this account and of the e-banking channels and agree to be bound by them. I/We hereby undertake to be held responsible for the PIN or password issued to me/us and undertake not to divulge it to any third party under any circumstances. You are requested to honour drawings and instruction bearing my/our signature as per the specimen given below and on your specimen signature card, and to honour any instructions from e-banking channels as specified on this form, I/We understand that such instructions are binding to me/us. I/We authorize you to make any inquiries you consider necessary in connection with this application.

Date: 13/03/2019Signature: Kelly ClintonCustomer Name: KELLY CLINTON

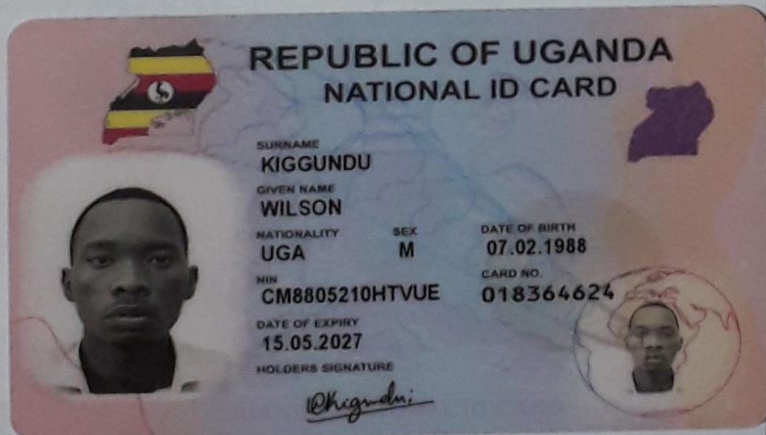


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