



GRAIN BULK SACCO LTD,
P.O.BOX 80469,
TEL: 254-014-230220/183,
FAX: 254-041-230232,

LOAN REPAYMENT GUARANTEE

I MR/MISS/MRS _____ employee No. _____ and membership No. _____ hereby acknowledge receipt of Kshs. _____ (_____) as loan and authorize GBHL to recover a total of Kshs. _____ (inclusive of interests at a rate of 1%) for a period of _____ month effective _____. **(This deduction is exclusive of monthly share contribution).**

Incase of default of payment or dismissal from work I, authorize GBHL to recover the same amount from my salary/ benefits to GB SACCO LTD.

Signed as accepted:

DATE:

CHECKED BY:

APPROVED BY:
