



LOAN REQUISITION AND RECOMMENDATION FORM

I..... MNO..... IDNUMBER..... HEREBY
APPLY FOR (.....) LOAN OF KSHS.....(IN WORDS)
KSHS.....TO BE PAID IN EQUAL INSTALLMENTS
OF KSHS.....PLUS INTEREST FOR A PERIOD OF MONTHS

	Loan Name	Outstanding Balance	Outstanding Loan Period
1.	Advance A		
2.	Advance B		
3.	Advance C		
4.	Rescue Loan		
5.	Normal Biashara		
6.	M-Keystone		
7.	Jiinue		
8.	Jiinue Boost		
9.	Inua Loan		
10.	Rescue Plus		
11.	Normal Loan		
12.	Ufanisi Loan		
13.	BOSA Express		
14.	FOSA Express		
15.	Karibu Keystone		

I commit & authorize my employer to deduct and remit any pay due in-case of termination or change of paypoint to clear my liability.

SIGNATURE..... TEL.....

DATE.....

TO BE FILLED BY EMPLOYER

NAME OF INSTITUTION.....P.O BOX TEL

WE HEREBY CONFIRM THAT THE ABOVE PERSON IS EMPLOYED BY THIS INSTITUTION AND IS STILL ON PAYROLL. WE ARE NOT INTENDING TO TERMINATE HIS/HER EMPLOYMENT DURING THE LOAN PAYMENT PERIOD.

RECOMMENDATION

HUMAN RESOURCE MANAGER

We further commit incase of termination of employment channel any (employee) pay due to clear the member's liability with the sacco.

NAMEINSTITUTION.....

SIGNATUREDATE.....

OTHER PENDING DEDUCTIONS.....

COMMENT (RECOMMENDED/NOT RECOMMENDED)

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ACCOUNTANT/PAYROLL OFFICER

We further commit incase of termination of employment channel any (employee) pay due to clear the member's liability with the sacco.

NAME SIGNATURE..... DATE

COMMENT (RECOMMENDEND/NOT RECOMMENDED)

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OFFICIAL STAMP.....