



**KEYSTONE DT SACCO**  
**The Sacco of Choice**

**P.O BOX 2073, TEL (057) 2024767, MOBILE: 0799946225, KISUMU – KENYA**

**Email: kitesacco@gmail.com, info@kitesacco.co.ke Web: www.kitesacco.co.ke**

**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.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

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**

NAME ..... INSTITUTION.....

SIGNATURE ..... DATE.....

OTHER PENDING DEDUCTIONS.....

**COMMENT (RECOMMEND/NOT RECOMMEND)**

**ACCOUNTANT/PAYROLL OFFICER**

NAME ..... SIGNATURE..... DATE .....

**COMMENT (RECOMMEND/NOT RECOMMENDED)**

OFFICIAL STAMP.....