

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

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**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 (RECOMMENDEND/NOT RECOMMENDED)**

……………………………………………………………………………………………………………….

OFFICICAL STAMP………………………………………………………………………………………...