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

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

Name:……………………………………………………………….

Address…………………………………………………………..

Tel /Cell No.…………………………………………………….

Date: ………………………………………………………………

**M-BANKING / PESA PEPE CLAIM FORM**

1. I advise that I made a transaction on …………………………………………………but the transaction failed, however, I have noted that my account was debited with the same amount.
2. I made two attempts at ……………………………., only one transaction was successful however my account was debited twice.
3. Other ……………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………

My account number is ……………………………………………………………………

My mobile number is …………………………………………………………………………

Amount of transaction …………………………………………………………………..

Date of transaction ………………………………………………………………………..

Would you please refund me by crediting my account.

Yours faithfully

**Sacco Officials (Signatures)**

Received By ………………………………………………………. Date:…………………………………………………..

Refunded By………………………………………………………. Date:…………………………………………………

***ATTACH COPY OF NATIONAL IDENTITY CARD***