



WASHA SACCO LTD.
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DEDUCTIONS FORMS

PERSONAL DETAILS

FULL NAME	
ID NUMBER	
PAYROLL NUMBER	
MEMBER NUMBER	
MOBILE NUMBER	
EMAIL ADDRESS	
EMPLOYERS NAME	

Please refer to my application for membership in the society and make the following variation in deductions in deductions with effect from _____ until further notice.

a. Share Capital

From (Kshs)	To (Kshs.)

b. Membership Deposit Contribution

From (Kshs)	To (Kshs.)

c. Savings Contribution

From (Kshs)	To (Kshs.)

d. Junior Account Contribution

From (Kshs)	To (Kshs.)

e. Welfare Contribution

From (Kshs)	To (Kshs.)

Applicant Signature _____ Date _____

FOR OFFICIAL USE.

Received by..... Designation.....Sign.....Date.....

Approved by Designation.....Sign.....Date.....