



KEWISCO REGULATED NON WTD SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED  
P.O. BOX 4491 – 00200 NAIROBI TELEPHONE: 0111-120600-5  
E Email:info@kewiscosacco.org,ceo@kewiscosacco.org,loans@kewiscosacco.org

NAME: .....

EMPLOYER: .....

EST/STAFF NUMBER: .....

DATE: .....

Please effect the following adjustments on my monthly deductions with effect from.....

|    | ITEM                          | FROM | TO |
|----|-------------------------------|------|----|
| 1  | Monthly Deposits Contribution |      |    |
| 2  | Share Capital Contribution    |      |    |
| 3  | Masomo Contribution           |      |    |
| 4  | Holiday Contribution          |      |    |
| 5  | Angel Contribution            |      |    |
| 6  | Emergency Loan                |      |    |
| 7  | School Fees Loan              |      |    |
| 8  | Mkombozi Loan                 |      |    |
| 9  | Development Loan 1            |      |    |
| 10 | Development Loan 2            |      |    |
| 11 | Reloaded Loan 1               |      |    |
| 12 | Reloaded Loan 2               |      |    |
| 13 | Super Shareholders Loan       |      |    |
| 14 | Super Savers Loan             |      |    |
| 15 | Platinum Loan                 |      |    |
| 16 | Instant Loan                  |      |    |
| 17 | Hire Purchase Loan            |      |    |
| 18 | Guaranteed Loan               |      |    |
| 19 | Angel Loan                    |      |    |
| 20 | Masomo Loan                   |      |    |
| 21 | Others:                       |      |    |

Yours faithfully,

Signature.....

Action taken by.....

Date.....

