



ARCHDIOCESE OF NAIROBI

SOCIAL PROMOTION REGISTERED TRUSTEE

SAVINGS TRANSFER FORM

IMember No.

do wish to transfer my savings to.....Member No.

Total amount of savings to be transferred is Kshs.....

(In words)

Details of member transferring savings:

ID No.....Mobile No.....Email.....

Name of SHG.....

Address.....

Signature.....Date.....

Details of member receiving savings:

ID No.....Mobile No.....Email.....

Name of SHG.....

Address.....

Signature.....Date.....

FOR OFFICIAL USE ONLY

Transfer effected /not effected for Kshs.....

Processed by.....Signature.....Date.....

Confirmed by.....Signature.....Date.....

Transfer approved by.....Signature.....Date.....

