



# UNITED NATIONS SACCO

*Financial Freedom In Your Hands*

2<sup>nd</sup> Floor, Zowe House, Area 40, City Center

## SHARE / DEPOSIT WITHDRAW SLIP

NAME  DATE  /  /

BOOK NUMBER

SHARES MWK.....

DEPOSIT MWK.....

TOTAL AMOUNT TO BE PAID  **MWK**

AMOUNT IN WORDS

### BANK TRANSFER DETAILS

ACCOUNT NAME													
BANK NAME													
ACCOUNT NUMBER													
BRANCH													

UN SACCO shall not be held liable for any payments made to wrong Bank Account and all charges upon making transfers shall be levied upon the SACCO member.

SACCO Member's Signature: \_\_\_\_\_

### FOR OFFICIAL USE ONLY

Prepared By: .....Position:.....Signature:.....Date:...../...../.....

Checked By: .....Position:.....Signature:.....Date:...../...../.....