SAUTI COOPERATIVE SAVINGS AND CREDIT SOCIETY LIMITED
P.O. BOX 300042-00100 NAIROBI|TEL: +254202108693, +2542066511178
Email: sautisaccoltd@gmail.com, info@sautisacco.com |website: www.sautisacco.com

SHARE TRANSFER FORM

Withdrawing Member

I _____full names as per your ID,
Member Number_____ Mobile Number_____

Email Address_____. Hereby make an application
to transfer my Sauti Sacco ltd shares worth kshs_____ to the below undersigned
member. I have made an official withdrawal from the Sacco giving 60 days' notice.

SIGNATURE		DATE	

Transferee

I _____full names as per your ID,
Member Number_____ Mobile Number_____

Email Address_____, apply to purchase the above
shares and receive the benefits arising.

SIGNATURE		DATE	

FOR OFFICIAL USE ONLY

ACTIONED BY…………………………. SIGNATURE……………………..DATE………………….