COSMOPOLITAN SAVINGS & CREDIT CO-OPERATIVE SOCIETY LIMITED

BANKERS

COOPERATIVE BANK OF KENYA LTD

P.O BOX 1931 2212415/6 – NAKURU

FAX 2215189 TEL.

E-mail info@cosmopolitansacco.co.ke

DIVIDEND	/INTEREST	ADVANCE	FORM
	/	ADIANCL	I VIVI

	DIVIDEND/INTEREST ADVANC	<u>CE FORM</u>
I	M/NO	TSC/OUT/PNO./F
total fr	hereby apply for Kshs com my yeardividend/interest as po	to be recovered in
war 11	dividend/interest as po	and conditions.
TERM	MS/CONDITIONS	
1.	Amount applied to be recovered instantly on div	vidend/interest payment.
	Amount to be granted is ½ but maximum Ksh; 5% on dividend/interest payable to the member.	•
3.	You must have been a consistent contributor and if you have any.	
I agree	e to abide with the above terms.	
Applic	cant Signature	
Phone	No	
OFFI	CIAL USE ONLY	
Accou	nts department recommendation Kshs	
	Signature	
AUDI'	T DEPARTMENT	
Check	ed By Name	
	ure	
POST	ED BY	
Name		
Signat	ure	
Date		