



KINGDOM SACCO SOCIETY LIMITED

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CHEQUE BOOK REQUISITION FORM

I.....ID/REG NUMBER.....

MEMBER NO..... ACCOUNT NUMBER

REQUEST FOR CHEQUE BOOK(S) OF 100 LEAVES

Please Debit my Account No with the total cost of the cheque book(s).

Yours faithfully,

Name.....

Sign.....

Date.....

FOR OFFICIAL USE

1. Authorized By:

Name Sign

Date.....

Comment:

.....

.....

2. Ordered By:

Name..... Sign

Date