



UN SACCO

Your Financial Anchor

REQUEST FOR BANKERS CHEQUE FORM

DATE:

D	D	M	M	Y	Y	Y	Y
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Member No.: _____ Name: _____

Dear Sir/Madam,

RE: BANKERS CHEQUES

I hereby authorize you to DEBIT my savings account number _____
with KES.(figures) _____ in words _____

Plus any commissions that may be levied in regard of the cheque and issue me with banker's
cheque(s) in favour of the following;

Payee: _____ Amt: _____

Payee: _____ Amt: _____

Payee: _____ Amt: _____

Payee: _____ Amt: _____

Signature: _____

TOTAL: _____

Purpose of payment: _____

(UN DT SACCO reserves the right to ask for evidence when deemed necessary)

Name: _____ ID No.: _____

Email: _____ Phone No.: _____

Signature: _____ Date: _____

OFFICIAL USE

Cheque Nos issued: _____ Amt: _____

Issued by: _____ Sign: _____ Date:

D	D	M	M	Y	Y	Y	Y
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Collected by: _____ Sign: _____ Date:

D	D	M	M	Y	Y	Y	Y
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