

# TARAJI SACCO SOCIETY LTD

## VARIATION FORM

I MR/MRS/MISS..... ID NO.....

MEMBER NO..... WORK STATION.....

MOBILE PHONE NUMBER.....

REQUEST TO INCREASE  DECREASE  (TICK ONE)

1. MONTHLY DEPOSITS FROM (KSH)..... TO (KSH).....
2. RISK FUND FROM (KSH)..... TO (KSH).....
3. CHRISTMAS SAVINGS FROM (KSH)..... TO (KSH).....
4. ELIMU SAVINGS FROM (KSH)..... TO (KSH).....
5. HOLIDAY SAVINGS FROM (KSH)..... TO (KSH).....
6. MEDICARE SAVINGS FROM (KSH)..... TO (KSH).....
7. LOAN REPAYMENT FROM (KSH)..... TO (KSH).....

TOTAL..... KSH.....

WITH EFFECT FROM THE MONTH OF..... UNTIL FURTHER NOTICE

TSC PAYSLIP PASSWORD..... TSC NO.....

PF NUMBER (FOR COUNTY GOVERNMENT).....

APPLICANTS SIGNATURE..... DATE.....

### **FOR OFFICIAL USE ONLY**

RECEIVED BY..... DATE.....

ACTIONED BY..... DATE.....