

MOMBASA PORT SACCO SOCIETY LTD

STANDING ORDER REQUEST FORM

The General Manager
Mombasa Port Sacco Ltd
P O Box 95372
Mombasa

Date: -----

RE: STANDING ORDER REQUEST

Please effect a Weekly/ Monthly/ Yearly transfer of Ksh ----- only (Amount in words) -----

----- In respect of share deposit/ loan

payment/ other (specify) ----- from my Mombasa Port Sacco

Account No. -----With effect from (date) -----

BENEFICIARY DETAILS

Account Name -----

Account No -----

Beneficiary Bank Name -----

Branch -----

Beneficiary Address -----

Beneficiary Mobile No. -----

This order will only be revoked by me in writing and will supersede any request made earlier.

Signed by me (Mr./Mrs/Hon./Miss/Dr./Eng) -----

Mombasa Port Sacco A/c No-----

Member No. -----

Identity Card No. -----

Mobile No. -----

Date -----

Signature -----

FOR OFFICIAL USE ONLY

Received by ----- (sign &stamp) ----- Date -----

Standing order approved/Not approved

Reasons for not approving -----

Approved By ----- (Sign &stamp) ----- Date -----