

**THE CO-OPERATIVE SOCIETIES ACT  
DEDUCTION AUTHORIZATION FORM.**

A.A KENYA  
P.O BOX 40087-00100  
NAIROBI.

**A) DEDUCTIONS FROM MY SALARY.**

I.....ID NO..... PAYROLL NO..... hereby authorize you to make deductions from my salary/proceeds of Kshs..... to be distributed as follows;  
Savings (Min Ksh2, 000) Kshs.....Share capital & enrollment fee Kshs..... to be remitted to Wenye Magari Co-operative Society to be credited towards my shares/savings account. From time to time, the said society may advice you on any other deductions. The instructions of the society shall be taken as if given under my hand. These instructions shall remain in force unless altered by me in concurrence with the said society.

Given under my hand this.....day..... 20... Signature .....Cell phone: .....

Referred by .....

CC: THE CHAIRMAN  
WENYE MAGARI SACCO  
P.O BOX 40087 -00100  
NAIROBI.

**B) NOMINATION/NEXT OF KIN.**

I hereby nominate the following nominee(s) to inherit my shares/proceeds from Wenye Magari Sacco.

NAME OF THE NOMINEE(S)	CELLPHONE	(%)	RELATIONSHIP

**OUR PRODUCTS**

- ❖ Monthly Savings
- ❖ Holiday/Christmas Savings
- ❖ Development Loans
- ❖ School fees Loans
- ❖ Emergency Loans
- ❖ Top-up Loans

- ❖ Salary Advance Loans
- ❖ Express Loans

Kindly enjoy our affordable low interest rates.  
**YOU ARE WELCOME!**

**NOTE:** New member is required to raise Kshs 5,000 share capital and Kshs 1,000 membership fee.