

P O Box 45821 Riverwalk, Gaborone

Tel: +267 3902023

Email: info@thutosaccos.co.bw
Website: www.thutosaccos.co.bw
Plot 140, Extension 3, Gaborone

RECRUITMENT ALLOWANCE CLAIM FORM

A) PERSONAL DETALS

Tick as applicable (Mr/Mrs/Ms/)	
Name:	Surname:
Date of Birth :	_
ID No:	_
Cell No:	_
Email Address:	
B) RECRUITEE DETAILS	
Names of Recruited members	Commencement Month of deduction
1	
2	
3	
4	
5	
6	
7	
8	
9	
10.	
C) CLAIMANT'S AMOUNT: P	
Amount in Words:	





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Bank Name :	Branch:	
Account No:		
Account Holders Names:		
Please provide the following: the forms for recruited members, a copy of your latest payslip or confirmation of your bank account, and a copy of young.		
Date :	Signature :	
FOR OFFICIAL USE ONLY		
E) Senior Accounts officer:		
1. Name:	Surname:	
Signature:	Date:	
Senior Accounts Officer Comments:		
K) Manager's Remarks: Approved:	Rejected:	
	Surname:	
2.Name:		

