THUTO SACCOS
Spells Successful Future

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SAVINGS AMMENDMENT FORM

Which savings account would you like to amend?

Ordinary ☐ Christmas ☐ Valentine ☐ Retirement ☐

I _____ of ID

Number _____ would like to increase / reduce my savings

Installment of P _____ to P _____ effective from (Month)

_____

Contact: _____

EMPLOYMENT DETAILS

Name of Organization _____

Department: _____

Signature _____ Date: _____