



SNAT SAVING AND CREDIT COOPERATIVE SOCIETY

SCHOOL FEES WITHDRAWAL FORM

TICK PAYMENT METHOD MOBILE MONEY BANK

1. Membership #:.....ID Number.....
2. Name of Member:.....
3. Address of Member:.....
4. School :.....
5. Contacts: Cell No.....Work.....
6. Employment No:.....
7. Last date of withdrawal:.....Amount withdrawn:E.....in words.....
8. Amount to be withdrawn E.....in words.....
- Closing balance (For office use only) E.....
9. Signature of Applicant.....
10. Date

BANK DETAILS

1. Member's Bank Account No.
2. Name of the bank
3. Branch of the bankcode.....

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Officer's Signature **Supervisor** **Finance Manager**

Date:

Cheque No.....

CPV: