

LAINISHA SACCO SOCIETY LIMITED.

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MEMBER DETAILS UPDATE FORM

Full NamesID/NO

Member no..... Farm No.....

CHANGES REQUESTED

Mobile no: From To.....

Specimen signature

Reason for change request.....

.....

I declare that the information given above is true and I hereby agree to have my details amended to the above.

Signature/ Thumbprint Date.....

FOR OFFICIAL USE ONLY

Changes effected by..... Signature..... Date.....

Approved by Signature..... Date.....