



KITUI TEACHERS DT SACCO SOCIETY LIMITED

SHARES DRIVE DIVIDEND AND INTEREST CAPITALIZATION FORM

I of ID No.....

P/No.....M/No.....Mobile No.....Age

Sacco Branch..... work station and postal address.....

.....

Hereby authorize the SACCO to capitalize my dividends/interest for the year

Amounting to Kshs.....(Inwords).....

in favour of shares drive.

.....
SIGNATURE OF APPLICANT

.....
DATE

FOR OFFICIAL USE ONLY

Amount of dividend/interest recommended Kshs.....

In words

Recommended by:**Design**.....**Signed**.....**Date**.....

Approved by:**Design**.....**Signed**.....**Date**.....

Verified by:**Design**.....**Signed**.....**Date**.....

Introduced by:**Design**.....**Signed**.....**Date**.....