



KITUI TEACHERS DT SACCO SOCIETY LIMITED

FRONT OFFICE SERVICE ACTIVITIES (FOSA)

NHIF CONTRIBUTION -ACCOUNT OPENING FORM.

Name:Salary account no.....

(Name as per ID card in block letters)

M/NO: P/NO:ID/NO:Mobile No:

NHIF NO:.....

Contribution per month (figures) Kshs.....

Amount in words.....

With effect from.....

Postal Address:

Introduced by (staff Name):Department:

Applicant signature:Date:

FOR OFFICIAL USE ONLY

Received By:.....Sign.....Date.....

Account opened by:.....Sign.....Date.....

Account no:.....Date opened.....