



KITUI TEACHERS DT SACCO SOCIETY LIMITED

FRONT OFFICE SERVICE ACTIVITY (FOSA)

MEMBER WELFARE JOINING FORM

NAME:SALARY ACCOUNT NUMBER:.....

(Principal Member)

M/NO: Payroll NO: ID/NO: Mobile NO:

Monthly contribution (In figures) Kshs.....

(Amount in words).....

MODE OF PAYMENT

Cash full year Kshs. 2,400

Pay bill

Salary

Bank STO

Introduced by (Staff Name):Department:

Applicant signature:Date:

FOR OFFICIAL USE ONLY

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

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

NOTES

- ✓ *Monthly contribution of Ksh.200*
- ✓ *Members are required to fill the benevolent fund nominee form and attach supporting documents of the beneficiaries.(Birth certificate for children & marriage certificate for spouse)*
- ✓ *A member becomes eligible to this benefit after 6 months of frequent contributions.*
- ✓ *Each member to be considered independently in cases where a member and the spouse are members.*
- ✓ *Children are considered from the date of notification of birth to 25 years of age as long as they are schooling.*
- ✓ *Death certificates should follow within one month after notification. Compensation will be as follows:*
- ✓ *Principal member- Ksh. 100,000*
- ✓ *Spouse- Ksh. 100,000*
- ✓ *Children up to 6 in number and up to 25 years Ksh. 50,000 with a proof that he/she is in college/ university.*