



UNITED NATIONS SACCO SOCIETY LIMITED

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FORM

FIXED DEPOSIT ACCOUNT FORM

NAME _____ INDEX/CO-OP NO _____

AGENCY: _____ ID/PASSPORT NO _____

TELEPHONE: _____ Email: _____

Please Open a Fixed Deposit account in my name under the following terms.

Amount to be fixed Kshs _____ **In Words** _____

Period to be fixed _____ **Months.**

Please debit my savings account the above amounts.

ON MATURITY -chose one:-

Credit the principle plus interest to my Savings account.	
Renew the fixed deposit with the principle plus accrued interest under prevailing terms.	
Credit my savings account with the interest and renew the principle under the prevailing terms.	
Any other instruction:	

Name _____ Sign _____

Date _____

For Official Use Only:

Data Input by _____ Sign _____ Date _____

Interest Rate _____ % P.a.