



**JAMII SAVINGS AND CREDIT CO-OPERATIVE SOCIETY**  
P.O Box 57929 -00200, Nairobi, Fax: 552523  
Tel: (020) 552477,552448, Mobile: 0712-852762, 0724-179890, 0736-613863  
Web: [www.jamiisacco.coop](http://www.jamiisacco.coop) E-mail: Info@jamiisacco.coop

## SPECIAL DEPOSIT APPLICATION FORM

Date.....

Mr/Mrs/Miss ..... ID/No.....

Mobile No .....

### Other Account Holders Details (If it's a joint Account)

Mr/Mrs/Miss..... ID/No.....

Mobile No.....

Mr/Mrs/Miss..... ID/No.....

Mobile No .....

M/no..... P/no.....

Total Amount Deposited..... Receipt No.....

Cheque No.....

For a period of..... Months

At an agreed interest rate of..... With effect from.....

I/We agree to abide by the By- Laws, Rules, and Regulations of the Society and any other variations by the Board of Directors in respect to the contract.

Signature..... Date.....

Signature..... Date.....

Signature..... Date.....



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**Next of Kin/Beneficiary**

Name..... Relationship.....

Address..... Telephone No.....

Name..... Relationship.....

Address..... Telephone No.....

**For Official Use Only**

**Amount Deposited..... Interest Rate.....**

**Commencement Date..... Maturity Date.....**