



P. O. BOX 44071, 00100, NAIROBI TEL. +254 020 2785000  
Email: [info@ukulimasacco.coop](mailto:info@ukulimasacco.coop) Website: [www.ukulimasacco.coop](http://www.ukulimasacco.coop)

**CASH TRANSACTION DECLARATION FORM**

**REF NO. UCSCS/F/FOSA/029**

1. Branch \_\_\_\_\_ Date \_\_\_\_\_

**SECTION A: PARTICULARS OF THE CUSTOMER ACCOUNT**

2. CUSTOMER'S NAME: \_\_\_\_\_ AC/NO \_\_\_\_\_

Amount (figures) \_\_\_\_\_ (Words) \_\_\_\_\_

**SECTION B: PARTICULARS OF TRANSACTION**

3. Please tick as appropriate:

**Types of transaction:**

Deposit

Withdrawal

4 a.) Source of funds: Please tick as appropriate

Sale Of property	
Cash Sales/business proceeds	
Mobile money float	
Rental income	
Sale of agricultural products/Livestock	
Others-please specify:	

4 b). Purpose of transaction: Please tick as appropriate

Payment to suppliers and workers	
Purchasing business stock	
Construction material	
Business use/petty cash	
Property purchases	
Others – Please Specify	

5. Supporting documents of the deposit or withdrawal transaction. Please tick as appropriate:

Do you have supporting documentation of the deposit or withdrawal transaction that you are providing? E.g.

Yes	No

If not, indicate the reason(s):

**SECTION C: CUSTOMER DECLARATION**

6. The undersigned declare that to the best of their knowledge and belief, the information contained herein is complete and accurate. I also certify that the funds in this transaction are not from proceeds of crime and will not be used for unlawful purposes.

**Details of person transacting:**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

ID NO. \_\_\_\_\_ Tel. No. \_\_\_\_\_

**OFFICIAL USE**

Teller Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Branch Manager: \_\_\_\_\_ Signature: \_\_\_\_\_

Has enhanced due diligence been carried out on the customer

Yes	No