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SPOUSE &CHILDREN DETAILS FORM

UCSCS/F/FIN/012

PART 1 - MEMBER'S DETAILS

Member's/Contributor's Name
Gender ID No. Payroll/No
Employer Work Station..... Ukulima Branch
Address

PART 2 - SPOUSE'S DETAILS

Spouse's Name Gender ID No

PART 3 -CHILDREN DETAILS

	Name	Gender	Age (Yrs)	ID No (If over 18)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

PART 4- DECLARATION BY MEMBER

I hereby declare that the information I have given above as regards my spouse and children is true to the best of my knowledge. I hereby authorize Ukulima Sacco to use the same should need arise.

Member's Signature Date

PART 5- BRANCH OFFICIAL TO COMPLETE

Witnessed by (Name) ID No Payroll No

Branch Position in Branch Office

Signature Date