

**TRANS NATIONAL TIMES SACCO SOCIETY LTD**

P.O. BOX 2274 - 30200 **Customer Service No**: 0111050510

Teachers Plaza, First Floor **Website**: www.tntsacco.co.ke

Next to Divisional Police Headquarters **Email**: info@tntsacco.co.ke

Kitale, Kenya.

**FORM: TNT 42 PAYBILL NO:** 533888 **ACCOUNT NO:** WRITE YOUR **ID NUMBER**

**REF…………………………………………………………………………. YOUR REF……………………………………..**

**THE CORRESPONDENCE TO;**

**THE CHAIRMAN T.N.T SACCO LTD**

**P.O BOX 2274**

**KITALE**

**SECRETARY**

**TEACHERS SERVICE COMMISSION**

**P.O BOX PRIVATE BAG**

**NAIROBI**

**REF: AUTHORITY FOR SHARE CONTRIBUTION BY CHEQUE OFF SYSTEM**

I the undersigned authorize you to deduct the sum of Kes………………………………………………………………………

(In words)……………………………………………………………………………………………………(Minimum Kes 1,600).

As share payments to and for the above mentioned Co-operative Society.

**My Name…………………………………………………………………………………………………………………………**

**My T.S.C No. …………………………………………………………………………………………………………………..**

**Effective date …………………………………………………………………………………………………………………**

**Station or school…………………………………………………………………………………………………………….**

**THE AUTHORITY SHALL ONLY BE REVOKED BY THE SECRETARY OF THE**

**CO-OPERATIVE SOCEITY LIMITED.**

**My two names…………………………………………………………………………………………………………………………….**

**My signatures……………………………………………………………………………………………………………………………..**

**CC: THE DISTRICT CO-OPERATIVE OFFICER**

 **TRANS-NZOIA DISTRICT**

 **P.O BOX 206**

 **KITALE**