



HEART SAVINGS AND CREDIT COOPERATIVE SOCIETY

P. O BOX 70000 - 00400 NAIROBI | TEL: 020 – 2390954 / 0102510592

EMAIL: heartsacco@gmail.com or info@heartsacco.co.ke

SHARES CAPITAL TRANSFER FORM.

To,
The Chairman,
Heart Sacco Ltd.
P.O Box 70000 (00400).
Nairobi.

Dear Sir,

I _____ hereby wish to sell my share capital
(400 shares @ Kshs. 20 each) to the following member.

Member's Name: _____

Member Reg No: _____ Date of Application: ____ / ____ / ____

Reason for Sale: _____

Number of Shares: _____ (In Words) _____

_____ only.

Amount Sold Kshs: _____ (In Words) _____

_____ only.

Effective DATE/ MONTH of Sale: Date: _____ Month: _____ Year: 202____.

Applicant Signature: _____ Date: _____

Member's Signature: _____ Date: _____

FOR OFFICIAL USE:

Approved by: _____ Signature: _____
Sacco Manager.

Date: _____.