ITSHETSENG
SAVINGS & CREDIT COOPERATIVE SOCIETY
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P O BOX 10228
LOBATSE
PELENG EAST
PLOT 4691
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Itshetseng SACCOS

LUMP SUM DEPOSIT DECLARATION FORM (To be completed in ink)

Particulars of the Member

Book No…….. Date……

First Name …… Surname……..

Omang No ……..... DOB: ……

Sex…… ……Employer ……

DEPARTMENT……Occupation……. …….

PHYSICAL ADDRESS

Street / Ward…….. Plot No ……

Town /Village……. Tel /Cell……

Amount deposited (P……)…….

……

Source of funds……..

Purpose of deposit…….

Date of deposit……..

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge. In case the above information is found to be false, untrue, misleading, or misrepresenting, I am aware that I may be held liable for it.

Full Names

Date: D D M M Y Y Signature:

Received By :(Names)

Occupation:

Date D D M M Y Y Signature:

Additional Requirements

1. Proof of Source of Funds

2. Copy of Omang