



COSMOPOLITAN DEPOSIT TAKING SACCO SOCIETY LIMITED

Dividends/Rebates Capitalization Request Form

PLEASE COMPLETE THIS FORM

I/WE _____ P/NO. _____

M/NO. _____ NATIONAL I.D. NO(S) _____ wish to request the Sacco to transfer my/our year _____ dividends/interest on BOSA shares/deposits fully to my BOSA deposits &/OR partially Kes. _____ (in words shillings _____)

(tick whichever applicable).

For BOSA shares/deposits as well as loan(s) distribution, kindly specify as below:

To BOSA Deposits Kes. _____

To BOSA Mandatory Shares Kes. _____

To BOSA Loans Kes. _____

To Salary Advance Kes. _____

(Tick as appropriate and specify the amounts to each segment)

NB: The above request will only be effected within seven days after submitting to the Sacco this fully filled form and will be based on the dividends/interest on BOSA shares/deposits qualified after their declaration at the AGM to be held/held this year _____. Terms & conditions apply.

Name _____ Signed _____ Date _____

Name _____ Signed _____ Date _____

Name _____ Signed _____ Date _____

Name _____ Signed _____ Date _____

FOR OFFICIAL USE ONLY:

Received by: Name _____ Sign _____ Date _____

MPA Captured by: Name _____ Sign _____ Date _____

MPA Posted by: Name _____ Sign _____ Date _____

Audited by: Name _____ Sign _____ Date _____