



UKRISTO NA UFANISI SACCO LTD



SAVING & CREDIT CO-OPERATIVE SOCIETY LTD.
P.O Box 872 00605 NAIROBI

TEL: 0720 339 673/ 020 7650 581 | www.ukristonaufanisicoop.co.ke | Email: info@ukristonaufanisicoop.com

Date: _____

Branch: _____

We the undersigned have formed a cell group to operate the fund.

The name of the group will be _____

Effective from _____

All cell group members will sign all loan guarantors' form.

Our cell group coordinator will be _____

Of P.O. Box _____ Tel No. _____

Any other new member joining the group will be communicated to the Sacco in Writing.

CELL GROUP INTRODUCTION LETTER

	<u>Membership No.</u>	<u>Name</u>	<u>Signature</u>
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FOR OFFICIAL USE

Verified By.....Date.....Signature.....

Updated By.....Date.....Signature.....

Comments.....
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