

**IG (Invest and Grow) Sacco Society Ltd**

IG Plaza, Khalisia Road 3, IG Plaza.

P.O. Box 1150, 50100 Kakamega, Kenya.

Landline: +254 (56) 30864

Mobile: +254 726 340 851 / +254 736 333 334

Email: info@igsacco.co.ke Website: www.igsacco.co.ke

Date:.....

PAYPOINT PARTICULARS FORM

Employer:..... Department:

.....

County: Sub-County

.....

Address: Tel No.: Email Address:

.....

BANK - FOSA**BRANCH - KAKAMEGA****BANK Code:****99 Branch Code: 060****STREET. KHALISIA ROAD 3****BUILDING: IG PLAZA**Payroll No.: *(Fill from the right)*

| | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

Account Number: *(to be filled by the society)***ACCOUNT TITLE/NAME:.....****(AS IT APPEARS ON THE BANK STATEMENT)**

Where some amount of money constitutes an overpayment to me, I hereby give irrevocable authority to my Bank to return the same to the employer whether or not I am in service with the EMPLOYER. This authority extends to any other Bank or

Account to which the same money may be transferred. I also commit that the salary should not be directed elsewhere without the express authority of IG (Invest & Grow) Sacco Society Limited.

This request supersedes any other request given prior to this date.

National ID/Passport No.: Signature: Date:

Note:

1. Attach copies of ID/Passport, payslip and proof of Sacco Account.
2. This form should be forwarded by Departmental head of the school or institution
3. Attach clearance letter from the current pay point.

REFERRED BY:

Name..... ID No.

FOR OFFICIAL USE ONLY:**Checked by:**

Name Signature: Date:

Approved by:

Name Signature: Date: