



**MPANZI SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED**  
P.o Box 100-90103 Wamunyu. Email: [mpanzisacco@gmail.com](mailto:mpanzisacco@gmail.com)

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**SACCO MEMBERSHIP WITHDRAWAL REQUEST**

The Chairman  
Mpanzi Sacco Society Ltd  
P.O BOX 100-90103  
Wamunyu

I do hereby request to withdraw my membership from Mpanzi Sacco Society Limited with effect from \_\_\_\_\_ this being my written notice. The reason(s) for my withdrawal is

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I am fully aware that according to the by-laws of Mpanzi Sacco that: A member may at any time withdraw from the society by giving a written notice of sixty (60) days. A 5% withdrawal fee of the total savings shall be charged as per the SACCO policy. No member will be allowed to withdraw from the Society before clearing all loan balances if any. I undertake to follow-up on the members whose loans I have guaranteed to ensure that I have been fully replaced. Otherwise, the society will continue to hold on to my deposits until the loans guaranteed have been fully replaced. I hereby make an application to withdraw from the Sacco and agree to conform to Mpanzi Sacco by-laws and any amendment thereof.

**PERSONAL ACCOUNT DETAILS**

Full Names..... Member No.....

ID Number .....

Signature ..... Date.....

**FOR OFFICIAL USE ONLY**

**Comments**

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Name..... Designation..... Signature ..... Date .....