



SAVINGS AND CREDIT COOPERATIVE SOCIETY

WE ASPIRE TO BECOME THE LEADING COOPERATIVE BUSINESS IN THE SADC REGION

SERIAL NO:

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INTEREST ON MEMBERS SAVINGS FORM

SEC NO:

Date of Application: Contact No:

I of Identity number

authorise Jwaneng SACCOS Ltd to pay out ☐ or reinvest ☐ my interest on savings for the year ended 30th April 2025. Amount of Bwp:

Provide the following Know Your Customer (KYC) compliant banking details below if you wish your interest on your savings to be paid out.

ACCOUNT NAME	
BANK NAME	
ACCOUNT NUMBER	
BRANCH CODE	
BRANCH NAME	

This is to confirm that the details given above are correct.

Member's Signature:

Date:

LOANS DEPARTMENT

Assisted Name:

Signature: Date:

Checked by:

Signature: Date:

Authorised by:

Signature: Date:

ACCOUNTS DEPARTMENT

Assisted Name:

Signature: Date:

STB No:

Signature: Date:

Pay Date:

Authorised by:

Signature: Date:

-No interest on savings will be issued with a cheque

-No pay out for interest on savings which is less than P300.00

-NOTE: NO INTEREST SHALL BE PAID OUT IF ACCOUNT IS IN ARREARS

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