



# LIMBE LEAF EMPLOYEES SACCO

P O Box 40044, Kanengo, Lilongwe 4.

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## PART A: MEMBER'S DETAILS

Name/(*Dzina lanu Lonse*):.....

Address/(*Adilesi*):.....

Phone Number: 

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

Company Number :.....

Department :.....

Job Title /(*Udindo Wanu*):.....

|  |  |
|--|--|
| <b>ADJUSTMENT</b><br><i>(Kusintha Zodulitsa)</i> | <b>REJOINING SACCO</b><br><i>(Ndikulowaso SACCO)</i> |
| <input type="radio"/>                            | <input type="radio"/>                                |

## PART B: MEMBER'S AUTHORIZATION AND INSTRUCTION

I ..... *Dzina lanu lonse* ..... hereby authorize Limbe Leaf Employees SACCO to effect the below adjustments to deductions from my monthly salary / wages being my investment in shares / savings deposits or both:

| Investment Pool<br><i>(Zilowe kuti ndalama zanu?)</i> | Current Deduction<br><i>(Yomwe Mwakhala mukudulitsa)</i> | Revised Deduction<br><i>Yomwe Muzidulitsa Pano</i> |
|---|--|--|
| SHARES – Redeemable ( <i>Masheya</i> )                | <i>Yomwe mumadulitsa Kale</i>                            | <i>Yatsopano</i>                                   |
| SAVINGS Deposits – Ordinary ( <i>Madipoziti</i> )     | <i>Yomwe mumadulitsa Kale</i>                            | <i>Yatsopano</i>                                   |
| Savings- EHSQ Welfare fund                            |  |  |
| Savings – Finance Welfare Fund                        |  |  |
| Savings – Shipping Welfare Fund                       |  |  |
| Savings – Limbe Leaf Ladies Fund                      |  |  |
| Savings – Lilongwe Agronomy Welfare Fund              |  |  |
| Savings-XYZ Savings Group                             |  |  |
| Savings- IT Department                                |  |  |
| Savings-HR Welfare Fund                               |  |  |
| Savings – Leaf Sales welfare fund                     |  |  |
| Savings-Leaf Accounts welfare Fund                    |  |  |
| Savings-Dowa Social Fund                              |  |  |
| <b>Total Monthly Deduction</b>                        | <i>Phatikizani zonse</i>                                 | <i>Phatikizani zonse</i>                           |

This is with effect from/(*Ziyambe Mwezi uti?*).....

Members' Signature:/(*Sayinani*).....Date.....