



# SUPERIOR HOTELS SACCO SOCIETY LTD

Pearl Palace Hotel 2<sup>nd</sup> Floor, P.O. Box 6622 - 00300 Nairobi.  
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## SHARE CAPITAL TRANSFER FORM

### TRANSFEROR (One Selling)

I \_\_\_\_\_ (Full Names as they appear on ID).

Staff No. \_\_\_\_\_ ID No. \_\_\_\_\_ Official Designation \_\_\_\_\_

Duty Station & Address \_\_\_\_\_

Mobile No. \_\_\_\_\_ E-mail Address \_\_\_\_\_

Hereby make an application to transfer my Superior Hotels Sacco share capital of \_\_\_\_\_ shares worth Kshs \_\_\_\_\_ to the below undersigned member. I have made an official withdrawal from Sacco giving 60 days' notice.

DATE \_\_\_\_\_ SIGNATURE OF TRANSFEROR \_\_\_\_\_

### TRANSFeree (One Purchasing)

I \_\_\_\_\_ (Full Names as they appear on ID).

Staff No. \_\_\_\_\_ ID No. \_\_\_\_\_ Official Designation \_\_\_\_\_

Duty Station & Address \_\_\_\_\_

Mobile No. \_\_\_\_\_ E-mail Address \_\_\_\_\_

Apply to purchase the above shares and receive the benefits arising thereof; please deduct from my salary of ----- month----- Year Kshs \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE OF TRANSFeree \_\_\_\_\_

### FOR SOCIETY USE ONLY

CLEARED BY *Credit Committee* \_\_\_\_\_ Date \_\_\_\_\_

CONFIRMED BY *Board Member* \_\_\_\_\_ Date \_\_\_\_\_

Transfer fee Clause 24 Bylaws (500/-) paid on: \_\_\_\_\_ Receipt No \_\_\_\_\_

N/B: THE ABOVE FEES IS NOT-APPLIACABLE TO RETIREES AND NEXT OF KIN.

### APPROVED BY MANAGEMENT COMMITTEE:

Chairman \_\_\_\_\_ Date \_\_\_\_\_

Hon Secretary \_\_\_\_\_ Date \_\_\_\_\_

Treasurer \_\_\_\_\_ Date \_\_\_\_\_