**TRAMOM REGULATED NON-WDT SACCO SOCIETY LIMITED**

Dynamic Building, Opposite Changamwe Social Hall, Next to Methodist

Church- Changamwe Old Mombasa- Nairobi Road

P.O. Box 93008-80102 Mombasa Kenya Tel: 0730 785 785

Email: info@tramomsacco.com Website: [www.tramomsacco.com](http://www.tramomsacco.com)

**SALARY PAYPOINT**

The Paymaster

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Dear Sir/Madam

**RE: PAYPOINT PARTICULARS**

I.................................................................................................................................... (Employee name) Staff No. ..................................................................... Member No. ............................................................... ID No. ....................................................... Do hereby request you to pay all sums of money due to me in respect of salaries or any money that may become due to me in any other form to my **TRAMOM SACCO WALLET ACCOUNT** through Co-op Bank:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Account Number | 9 | 1 | 9 | 2 | X | X | X | X | X | X | X | X | X | X |
| Bank Name | Cooperative Bank of Kenya |
| Bank Code | 011 |
| BRANCH CODE | 054 |
| BRANCH NAME | KENYATTA AVENUE, MOMBASA BRANCH |

I agree that this instruction is irrevocable without the consent of **TRAMOM REGULATED NON-WDT SACCO LTD** and that it supersedes any other request given by me prior to this date.

Dated this............... Day of ........................................20....................

Signature: .............................................