

P. O. BOX 44071, 00100, NAIROBI TEL. +254 020 2785000 Email: info@apstarsacco.coop Website: www.apstarsacco.coop

DIVIDEND CAPITALIZATION FORM

Memb	er's Name		P/No	
Employer			National ID No	
Mobile No			Email address	
Postal	Address	Code		
a) b)	The :	vitalize my Interest/ Dividend for the year ended 31st December y succeeding year Deposits		
As per	the instruct	ions here below and advise me acc	ordingly.	
	100% of di	vidend and interest rebates		
	50% of div	ridend and interest rebates		
	Any other j	percentage (specify)		
Signat	ure		Date	
For O	fficial Use (<u>Only</u>		
Autho	rized by	Signature	Date	
Action	n taken by	Signature	_ Date	