

## MOFAA SACCO SOCIETY LIMITED

JEDA PLAZA, KAMITI ROAD OFF LUMUMBA DRIVE /Tell; 0717-929424 / P. O Box 64742-00620/ EMAIL; sacco@mofaenterprises.com

	Our DATE	Ref:	MMSL/LOAN/MEMBER-
	Dear Sir/Madam,		
	confirming that we are prepared to gran	t you a loan facility of <b>Ken</b> y	ed
1.	Purpose of facility  The proposed facility will be utilized folioan shall be used only for the purpose s		The whole amount of the
2.	Repayment	n your contributions in	Equal term monthly installment of KShs th from the date of draw down.
3.			est from the date of draw down (as well as er) at a rate of 1 per cent (1%) per month on
	The proposed facility will also attract a l	in evaluating the proposal	evaluation fee of 1 per cent (1%) one off for for the facility. You will be required to pay
	SECURITY  The proposed facility will be secured by:  ➤ Savings for the borrower and G		
	Yours faithfully, MOFAA SACCO LTD		
	LOAN OFFICER:  NAME:		
	Signature	Date	