

KIMBILIO DAIMA SACCO P.O BOX 81-20225 KIMULOT 0710617121

M-KIMBILIO REGISTRATION FORM

Full Names:	
ID No (Attach a copy)	
Account No:	Mobile Phone No
SERVICES OFFERED:	
 Withdraw Cash to M-Pes Advance request Mini-statement Check balance -Accour My account- Change Pir 	nt balance, Loan balance,Advance balance
Use of Mobile banking serv	ices is subject to terms and conditions below.
 Account Ownership/Accurate ✓ You represent that you information which may lead to also agree not to misre agree to keep your accurate that you are an authorize. User Security. ✓ You agree to take every account and transaction provide your password of permit other persons to Mobile Banking, you are be liable for any damage content or use of Mobile. 	Information. In are the legal owner of the Accounts and other financial ope accessed and used for the purpose of Mobile Banking. You present your identity or your account information. Further, you ount information up to date and accurate. Lastly, you represent ed user of the Device you will use to access Mobile Banking. If your precaution to ensure the safety, security and integrity of your ons when using Mobile Banking. Secondly, you agree not to or any other access information to unauthorized person. If you use your Device, login information, or other means to access responsible for any transactions they authorize and we will not es before, on or thereafter. We make no representation that any ille Banking is available for use in locations outside of Kenya. In grown locations outside of Kenya is grown locati
.Applicants Signature:	Date:
FOR OFFICIAL USE ONLY	
Data Captured By:	Signature and Date:
Verified Rv	Signature and Date:

Approved By: ______Signature and Date: _____