

Usalama Co-operative Savings and Credit Society Limited

P.O. Box 26800 Kampala
Reg.No.6996 Tel/Fax 0414271349

To : The Manager,
From :
Date :
Subject : **Authority letter**

This is to authorize you to reduce my monthly savings deduction from
shillings.....to shillings.....with effect from
.....

Sign.....

Tel.....