

NASCS NICS 07

Website: <https://nascs-nics.e-cooperative.com.ng>

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1.Name

Surname

Middle Name

First Name

2. File Number _____ 4. Department _____ 5. Sex _____

7. Home Address

8. Mobile Phone No. _____ 9. Email _____

9. Email

9. Total Amount Contributed

Target Accounts **N**

10. Date of 1st Contribution _____

11. Date of Last Contribution

12. Target date of Payment _____

13. Any break in contribution? _____

a) Any previous withdrawal? Yes/No Amount ~~N~~_____

b) Less administrative Charges ~~N~~

c) Total Balance in Account **N**

14. Amount being requested **N**

16. Applicant signature _____ Date _____

17. Member's Account Details

Account name	Bank
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Account Number	Branch
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Recommendation

Signature _____ Date _____

First Approval _____

Signature _____ Date _____

Final Approval									
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Signature _____ Date _____