



**FEDERAL ROAD SAFETY CORPS SULEJA STAFF
COOPERATIVE THRIFT AND LOAN SOCIETY
(FSS-CTLs)**

REVIEW OF CONTRIBUTIONS FORM

NAME:

PIN: RANK:

COMMAND: PHONE NO:

BANK: ACCOUNT NO:

CURRENT MONTHLY CONTRIBUTION (₦):

NEW MONTHLY CONTRIBUTION (₦):

WITH EFFECT FROM:

***I confirm that I have provided the information above and agree to the terms and conditions governing FSS-CTLs monthly contributions:**

Signature: Date:

FOR OFFICIAL USE ONLY

FINANCIAL SECRETARY'S COMMENT:

SIGNATURE: DATE:

PRESIDENT'S COMMENT:

SIGNATURE: DATE:

Pay a non-refundable fee of ₦1,000 into FSS-CTLs First Bank Account 2041556018 and attach evidence