



MONTHLY SAVINGS COMMITMENT FORM

By virtue of the provisions of Article 73, paragraph 2 of the Law N° 66/2018 of 30/08/2018 as completed by the amended Law N° 027/2023 of 18/05/2023 regulating labour in Rwanda,

In accordance with the provisions of Article 11, paragraph 1, subparagraph 4 and Article 12, paragraph 1, subparagraph 2 of the Statutes of *Caisse d'Entraide de Butare* (CEB)

I (*names of new applicant or existing CEB member*) ,
having CEB membership N° , reachable via Phone N° ,
Email and employed by (*acronym of the institution you are affiliated to*) voluntarily allow my employer/commit myself to deduct from my monthly salary the sum of
..... Rwandan Francs (Frw.....),
starting from the month of /20..... to the benefit of CEB. That amount will constitute my monthly savings in CEB and it will only be used as provided for by the Statutes, Internal Regulations and Procedures of CEB.

Done at on/...../20.....

Signature of new applicant/existing CEB member:

Full names (as on national I.D or passport):

National I.D/Passport N°:

Issued at (District and Sector):

On behalf of the Board of Directors of CEB,

Signature: Date:

Names and designation:

Stamp of CEB