



REFERENCE FORM

CAUTION
IT IS NOT ADVISABLE AND IT IS VERY DANGEROUS TO INTRODUCE A PERSON WHO IS NOT WELL KNOWN TO YOU.

Date:
To: The Manager,
ASO Savings and Loans Plc.
Branch:

Dear Sir,

NAME OF INDIVIDUAL/COMPANY

The above named person (s)/company wish(es) to open an account with you. I/We wish to confirm that I/We have known the above named person (s)/company for at least six months and the above named person (s)/company is well known to me/us. I/We wish to confirm that the above named person (s)/company is suitable to maintain an account with you and would like to comment thus:

Name:

My/Our contact address is:

My/Our contact number (s) is/are:

My/Our e-mail address is:

I/We maintain a current account with:

Name of Bank

Address

Account Number

Signature of Referee

(To Be Completed by Bank Official)

From: Aso Savings & Loans Plc.

To: Referee's Banker (as above)

Please verify the signature (s) of your customer as above

ASO AUTHORIZED SIGNATORY

ASO AUTHORIZED SIGNATORY

(REFEREE'S BANKER)

From:

Branch/Address

To: Aso Savings & Loans Plc.

We verify and confirm our customer's signature (s) here on

We confirm reference here on

Reason for unsuitability (please state reason if reference unsuitable)

AUTHORIZED SIGNATORY

(Signature, Date, Stamp)

AUTHORIZED SIGNATORY

(Signature, Date, Stamp)