

TEACHERS SERVICE COMMISSION



BANK FORM

SCHOOL & ADDRESS:

THE SECRETARY  
TEACHERS SERVICE COMMISSION  
PRIVATE BAG  
NAIROBI

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THRO'

CELL PHONE NO. \_\_\_\_\_

THE HEAD OF INSTITUTION / DEO / MEO.

**PAYPOINT PARTICULARS**

BANK \_\_\_\_\_ BRANCH \_\_\_\_\_

STREET\ BUILDING \_\_\_\_\_

COUNTY \_\_\_\_\_ DISTRICT \_\_\_\_\_

TSC DEPT.   SPECIFY \_\_\_\_\_  
PRIMARY /SECONDARY

TSC/PF NO:

BANK CODE:  BRANCH CODE:

ACCOUNT NUMBER:

CURRENT / SAVING

ACCOUNT TITLE/NAME: \_\_\_\_\_  
[As it appears on the Bank statement ]

Where same amount of money constitutes an **overpayment** to me, I hereby give irrevocable authority to my **Bank** to return the same to the **Teachers Service Commission (TSC)** whether or not I am in service with the Commission.

This authority extends to any **other Bank or Account** to which the said money may be transferred.

This request supersedes any other request given to this date.

SIGNATURE: \_\_\_\_\_

National I/D Card NO: \_\_\_\_\_ DATE: \_\_\_\_\_

**NB: Attached certified copies of I/D and proof of Bank Account  
To be forwarded by the Head teacher/principal of your school/institution.**