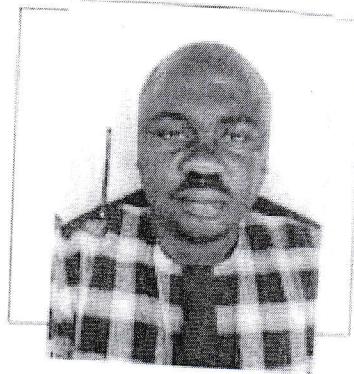




IDENTITY CARD FORM



134 Hammarway way Jalungo
7th Oct 2019
S023180

Staff ID Card Number: **S**

NAME:

EZEKIEL ANDEFIKI		
Surname	First Name	Others

POSITION:

DIRECT SALE EXECUTIVE

UNIT/BRANCH:

UBA BARADE TURAKI WAY JALUNG

STAFF SIGNATURE:

AUTHORISATION:

[Empty box for authorisation]

This form must be returned with other completed documents for prompt processing.