

**Schedule F**

**[Requesting Bank Letterhead]**

**FACSIMILE**

The Director,  
Banking Services and National Payment System Department,  
Central Bank of Kenya  
P.O. Box 60000,  
**NAIROBI**

Attention: .....

Date: .....

Dear Sir,

**Request for KEPSS Account Transfer**

In accordance with section 14.6 of the Rules and Regulations, we submit the following listing of transactions for input to the KEPSS system on our behalf. We confirm that we have received permission to make this request from *[Name of Authorizing Officer at Central Bank of Kenya and time]*.

**Name:.....**

**Time:.....**

<b>NO.</b>	<b>Amount</b>	<b>Bank to be credited</b>	<b>Transaction reference number</b>
<b>1.</b>			
<b>2.</b>			
<b>3.</b>			
<b>4.</b>			

Yours faithfully

Duly authorized Participant Signatories

Name .....

Designation.....

Signature

**Signature verified**

.....

Name .....

Designation.....

Signature

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**This part for use by Central Bank of Kenya**

Central Bank of Kenya

Authorising Signatures: (1).....

(2).....

Time of Request Receipt:.....

Account Transfers effected ..... *[time and name of Authorising Officer]*.....

**Name:**.....

**Time:**.....