KUMBU KUMBU SACCO SOCIETY LTD.

Email: info@kumbukumbusacco.co.ke
Mobile: 0713 – 957671
Wireless: 020 232 4531

P.O Box 22330 - 00400
Tel: 3744708
Nairobi.

NOMINEE CARD

EMPLOYMENT PF/NO:----------ID.NO…….Mobile.no……..

YEAR OF BIRTH……...**Email**……..

(PER BY-LAW NO.13)

Pursuant to the By-laws of this society Mr/Mrs/Miss/Dr/Prof ----------

M/NO.----------hereby nominate :-

1. NOMINEE

Name----------ID.NO----------

Relationship----------Mobile no----------

2. BENEFICIARY

	NAME	ID.NO	RELATIONSHIP	ADDRESS	SHARE
1					
2					
3					
4					
5					

As the person(s) to receive the monies standing to the credit of my share capital and members deposit accounts in the said society at my death.

Signed:----------

Date:----------Day of:----------

Witness 1: Name:----------Sign:----------Date:----------

Witness 2: Name:----------Sign:----------Date:----------

NB: Nominee-One to be contacted in case of your absence

Beneficiary-Recipient at your demise