



BENEVOLENT FUND CLAIM FORM

PART A

TO BE COMPLETED BY THE CLAIMANT/CONTRIBUTOR

Full names of the contributor: _____

Membership/ Staff No. _____ Telephone Number _____

ID No _____ Branch _____

PARTICULARS OF THE DECEASED:

Name of the deceased: _____

National ID card No: _____ Date of Birth _____

Relationship _____

I certify that the information given above is correct to the best of my knowledge.

Name of Claimant: _____ Signature: _____ M/No: _____

Witness by: _____ Signature: _____ M/No: _____

Date: _____

PART B

FOR OFFICIAL USE ONLY

Verification by: Registry Officer

a) Date of Joining the Scheme: (indicate) ____/____/____

b) Mode of Contribution

<input type="checkbox"/>	Direct Debit
<input type="checkbox"/>	Payroll
<input type="checkbox"/>	Pension check off

(tick as appropriate)

c) Total contributions/ NOT in default Kes: _____ /

*I certify that the information provided by the claimant is sufficient for the purpose of processing settlement of the said claim. *Attached are copies of the identity card for the deceased and original death notification certificate or burial permit.*

Registration Officer: _____ Signature _____ Date: _____

Credit Manager _____ Signature _____ Date _____

Senior Accountant _____ Signature _____ Date: _____

PART C

APPROVAL BY THE CREDIT COMMITTEE

We have today examined the above claim in conjunction with policy guidelines and decided as follows.

- i. Disburse approved shillings _____ to the appointed nominee on account of the **BANKI KUU SACCO BENEVOLENT FUND SCHEME**.

Credit Committee Minute No.....Date.....

Chairman

Secretary

Member

Checklist:

Are the listed documents attached: -

- A copy of your death notification or burial permit
- A copy of National ID(if deceased 18 year and over)
- Bank Account details/instruction form
- Others (specify)
