

Kenya Police Sacco Plaza, Ngara Road, off Muranga Road, A / P.O.Box 51042-00200, Nairobi Pilot No. 0709825000 E / info@policesacco.com W / www.policesacco.com

## **NEXT OF KIN NOMINATION FORM**

PI FASE	COMPLET	F DETAILS IN	N CAPITAL I	LETTERS -

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Full Names	ID No.		Current Postal Address
Email Address		Mobile Number	

## **B: BENEFICIARIES INFORMATION**

Nominees' Full Names	ID No.	Relationship	Date of Birth	(%)	Telephone No.	РО Вох

 $\label{eq:NB:if} \mbox{MB: if more than one nominee are listed, please indicate the percentage to pay to each of them}$ 

## C. UBF NOMINEES (SPOUSE AND/OR CHILDREN)

Nominated Spouse and children's details (Attach copy of spouse ID and copy of birth certificates of children. Benefits to the beneficiaries have been listed on page 2)

Full Names	Mobile Number	ID No./ Birth Certificate No.	Relationship	Date of Birth	Postal Address
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Signature:	 Date:	 /	/



## **UTUMISHI BENEVOLENT FUND**

This is an insurance product that members contribute Kshs. 350 monthly. The benefits are:-

- 1. Incase of the demise of the principal (member) the society will make a payment of Kshs. 70,000 (seventy thousand shillings).
- 2. For cases of death of a spouse (one spouse) the society will pay Kshs. 40,000 (forty thousand shillings).
- 3. A deceased member will also have his/her deposits doubled.
- 4. For cases of death of a child, the society will pay Kshs 30,000 (thirty thousand shillings) per child up to a maximum of 4 children in a year up until 24 years of age.