



BRAEMEG SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LTD

P.O BOX 45112 – 00100 Tel: 3872300 Nairobi, Kenya



NOMINEE FORM

SURNAME _____ OTHER NAMES _____

I.D NUMBER _____ PIN NO. _____

MEMBER ACCOUNT NO. _____ PAYROLL NO. _____

DEPARTMENT _____ JOB TITTLE _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

HOME ADDRESS _____

TEL/CELL No. _____

I hereby nominate the following nominee(s) to inherit my deposits in the Sacco in the following manner

Name of Nominee(s)	I.D Number	Relationship	% of the Deposits

In case the Nominee(s) is a minor(below 18yrs) a Guardian should be appointed to represent the nominee(s)

GUARDIAN DETAILS

Name: _____ I.D No. _____

Address _____ Tel/Cell No. _____

Given under my hand this day of 20.....

Signature _____