



**GRAIN BULK SACCO LTD,**  
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**OUR REF: GBS/07/18/MEMBERSHIP**

**NOMINATION OF BENEFICIARY FORM**

I hereby make an application for membership and agree to conform to the Society's by laws, internal rules and regulations and amendment thereof.

**FULL NAMES:** MR, MRS, MISS .....

**ID No.:** .....

**DATE OF BIRTH:** .....

**HOME ADDRESS:** .....

**TELEPHONE No.:** .....

**STAFF No.:** .....

**OFFICIAL DESIGNATION:** .....

**TERMS OF SERVICE:** PERMANENT, CONTRACT (Specify contract Period.....)

**NOMINATED NEXT OF KIN**

I, the undersigned, in the event of my death whilst a member of the society, hereby instruct the society to pay all amounts due to me less any debts to the society, to the person named in this section. I understand that I may alter the name of the nominated next of kin by filling in a subsequent Nominated Next of Kin Form. [The name of your nominee can be given in a sealed envelope]

**NOMINATED NEXT OF KIN [FULL NAMES]:**

1. ....ID No. ....Percentage.....

2..... ID No. ....Percentage .....

3.....ID No..... Percentage.....

**RELATIONSHIP TO THE APPLICANT** .....

**WHEREAS THE NEXT OF KIN ARE/IS UNDER 18 APPOINT RELIABLE GUARDIAN**

**NAME** .....**ID NO./ PASSPORT NO:** .....

**RELATIONSHIP TO THE APPLICANT** .....

**CONTACT OF NEXT OF KIN** .....

**WITNESS** .....

[ MEMBERS NAME ]	[ MEMBERSHIP No.]	[SIGNATURE]
.....	.....	.....
DATE: .....		

