

ZOGHORI REGULATED NON-WDT SACCO SOCIETY LTD

TILU- BILU BUILDING 1ST FLOOR, LET WING ALONG DIGO ROAD OPP. G.P.O. (HUDUMA CENTRE)

"Save Regularly, Borrow Wisely, Repay Promptly"

P. O. BOX 86838 80100 TEL: 0720 615 062/ 0731273560 Email:zoghorisacco@yahoo.com info@zoghorisacco.com website:www.zoghorisacco.com

CHANGE OF NOMINATED NEXT OF KIN FORM

I,				of MEMBER
REG NO:and II	D NO	• • • • • • • • • • • • • • • • • • • •	. do hereby change	e the names
of previously nominated next of k	in/s. The undersign	ned person/s w	ill be my next of l	in in the
event of my death whilst a member	er of the Zoghori Sa	acco Society li	mited. I instruct tl	ne company
to pay all amounts due less any de	bts.			
FULL NAMES	ID/BIRTH CERT NO:	RELATIONSHIP	PHONE NO	%
MEMBER'S SIGNATURE DATE				
WITNESS' FULL NAMES:				
REG NO:	SIGNATURE	DATE		
Note:				
• Attach members cop	y of I.D plus next of I	Kin copy/s of I.D	and in case under-	age attach
copy of birth certific	ate/s			
• Kindly note signing t	this form nullifies/inv	alidates any oth	er next of kin form p	oreviously
signed				
Come, Let's Build One Another © 2022				