

Appointment of Nominee

Nominee's Full Names	ID No.	Date of Birth	Telephone	Address	%	Relation

Special Instructions

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And in the event of death I authorize you to pay all sums due to me to the person(s) now so nominated.

Signature of Member Date

Return to the Secretary COCOTECH SACCO Address 15633 Code 00503 Mbagathi.

For Official Use Only

Date of Admission Membership No

Date of Cessation Memberships receipt No

Approved/Rejected By Management Committee Minute No