

**NOMINATION OF BENEFICIARIES FORM**

Member's Name..... S/No.....

Date of Birth..... ID NO.....

Region..... Station.....

Permanent Postal Address: .....

Email Address: ..... Tel No. ....

**Beneficiaries: ( Attach copy of Marriage Certificate/Affidavit for spouse and Birth Certificates for children)**

Full Name	Relationship	Date of Birth	Gender	Percentage

**DECLARATION**

I nominate the person(s) named above to be my preferred beneficiaries to receive any lump sum benefits payable under the Rules of the Kenya Power and Lighting Company Limited Staff Retirement Benefits Scheme 2006 in the event of my death.

I understand that the Trustees have complete discretion over the payment of the lump sum benefit and although the Trustees are prepared to consider my wishes, my nomination of a beneficiary is not binding on the Trustees.

This nomination cancels and replaces any previous nominations signed by me. I declare that the details given above are to the best of my knowledge and belief correct.

Member Signature..... Date.....