CONFIDENTIAL



CONFIDENTIAL

S/no	 	

SHERIA SACCO SOCIETY LIMITED

NOMINEE CARD

ID Number		PJ/PF/MNO						
Email			Mobile Number					
Pursuant to the By- Laws of thi I Hon Justice/Mr./Mrs/Miss	•				do hereby	nominate		
Name	Date of Birth	ID. Number	Relationship	Mobile Number	Email	Percentag		
As persons to receive the mon at my death, less any indebted	_		•	nd deposits	accounts in the	ne Society		
Signature	Sta	ation		Date				
Witness NameDate			S	ignature				