



# NG'ARA MAISHA SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED

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## BBF Claim Form (Revised 2021)

Claimant's Name ..... Tel No.....

ID No.....Relationship to deceased.....

Occupation of deceased.....Burial Permit No.....

ID No of deceased/Birth Cert No.....Marriage Cert No.(optional).....

A/c No. of claimant.....Bank.....

Branch.....

### Declaration

I .....solemnly declare that this form contains a full and true statement of details so required. It is issued without alteration. I also confirm that the following have been attached to this form;

- i). A letter from the deceased employer(if member)
- ii). Member latest pay slip
- iii). A letter from Administration(At least Assistant Chief)
- iv). Letter from the claimant/beneficiary confirming death
- v). A burial permit & a copy of it
- vi). Copy of the deceased ID
- vii). Copy of the claimant's ID
- viii) Birth certificate & a copy(for Child & Spouse where necessary only)

Claimant's Signature.....Date.....

Centre Representative's Name & signature.....Date.....

### For official use only

Received by:

Name .....Sign.....Date.....

### BBF Sub-committee

Name of claimant	Relationship to deceased	Amount awarded	Remarks

Chairman BBF Name.....Signature.....Date.....

Claimant's confirmation of receipt- Name.....Sign.....Date.....

***Information in this form will be kept confidential. No erasures or cancellations are permitted.***