

CODE: 99092

Name _____

Address _____

Date _____

E-mail _____

Mobile No _____

Pensions Secretary/Director
The National Treasury
Pensions Department
P.O. Box 20191 – 00200
NAIROBI

PAYMENT OF MONTHLY PENSION – CHANGE OF PAYPOINT

I _____ Pension No. _____

Would like my monthly pension to be transferred from:-

Bank _____ Branch _____

Account Number _____

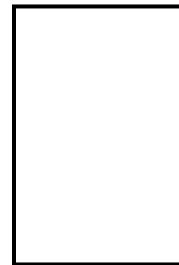
To (Name of Bank) _____ Branch _____

Account Number _____ (Note:- **JOINT ACCOUNTS NOT ACCEPTED**)

Attached is a photocopy of my Identity Card and Bank Plate.

Yours faithfully,

Name _____ Signature _____ Thumb Print



(Left Hand Thumb)

For Official Use Only:-

Acted upon by: Name _____

Signature _____ Date _____

Checked by: Name _____

Signature _____ Date _____