



NEPTUNE INVESTMENTS GROUP
NOMINATION OF BENEFICIARIES/NEXT OF KIN FORM

MEMBER DETAILS

Name: _____ Date of Birth: _____

National ID Number: _____ Membership Number: _____

Mobile Number: _____ Email Address: _____

DECLARATION

I _____ of Membership Number _____

in Neptune Investments Group hereby request the Group to pay any benefits in my name which shall become due pursuant to the Group's Constitution Article 3 Section 8.

No	Name	Relationship	Contacts	Proportion in Percentage

As the person(s) to receive the monies standing in credit of my shares, contribution or any other interest/dividend in the Group at my death in the proportion(s) indicated against the name of each nominee, in the proportions specified.

I further request the Group to record this nomination. I understand that this nomination nullifies the previous nominations.

Signature: _____ Date: _____

Name of witness (must be a member): _____ Signature: _____

FOR OFFICIAL USE

Received and recorded by the Group on _____ Under minute number _____

Chairperson _____ Secretary _____