

## **ARCHDIOCESE OF NAIROBI**

## **SOCIAL PROMOTION REGISTERED TRUSTEES**

## LOAN SECURITY CLAIM FORM

Date:		
Name of the Group:		Self Help Group
Address of the Group:		Contact
Name of the Deceased Member:		Member No
ID No		Loan No
Amount of loan Outstanding Kshs		Date:
Date Claim filed:		Date of Demise
Next of kin Name:		Sign
Name	Signature	Date
Chairperson		
Secretary		
Treasurer		
Patron		
<b>NB:</b> Attach certified copy of burial permit or death certificate, original loan application form and member's identification document.		
OFFICIAL USE ONLY		
LOAN SECURITY COMMITTEE REPORT		
Claim No		
Approved: Yes No		
Description		
Amount Approved		
Committee Minute No.	Date:	
Confirmed by:		
Name	Signati	ure Date
Chairperson		