



# Benevolent [Last Expense Plan] Claim Form

PLEASE COMPLETE IN BLOCK LETTERS OR TICK (✓) APPROPRIATE BOX UNLESS OTHERWISE INDICATED

Member No

## DETAILS OF CLAIMANT...

Title  Surname  Other Name(s)

ID/Passport No  Relationship to Deceased

Telephone [W]  [H]  Mobile

## DETAILS OF DECEASED...

Title  Surname & Other name(s)

Date of Birth  ID/Passport No

Date of Death  Date of Joining Scheme

Relationship to Main Member  Self  Spouse  Child  Parent  Parent-in-Law  Other

Cause of Death  Natural  Accidental

Amount Claimed

## DECLARATION AND CERTIFICATION...

I/We, the undersigned, and duly authorized to make this declaration, hereby declare that the deceased qualified for benefits in terms of the policy at the date of death, that the above information is complete and correct, and we recommend that the claim be admitted. Further, that the claimant has verified the accuracy of the payee details before submitting the claim and that the payment of the proceeds due in respect of the said member/life assured as selected on Section D shall represent the full discharge of Safaricom SACCO Limited's liability.

Title  Surname  Other Name(s)

Signature  Date

## REQUIRED CLAIMS DOCUMENT (S)

Tick Attached Docs Accordingly

Copy of Burial Permit Stamped by Hospital or Mortuary.  
(If Not, Share Mortuary Admission/Receipts/Discharge Forms)  Yes  No

Certified copy of ID/Passport document of the scheme member or beneficiary  
(Where the Deceased Is a Member)  Yes  No

Certified copy of the marriage certificate if it's a spouse claim  Yes  No

Certified copy of marriage certificate and birth certificate to spouse  
(If the deceased is an in law).  Yes  No

Certified copy of the birth certificate if it's a child or parent's claim  Yes  No

Satisfactory proof of a stillborn child will be required at claim stage  Yes  No

Police abstract report for accidental death  Yes  No

All required claim documentation must be emailed to: [sacco@safaricom.co.ke](mailto:sacco@safaricom.co.ke) or be submitted to any Safaricom SACCO Offices.