

# PAYMENTS OF BENEFITS



[www.nssf.or.ke](http://www.nssf.or.ke)

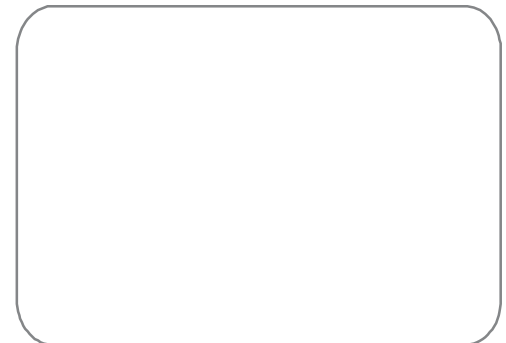
## REQUEST FOR ELECTRONIC FUNDS TRANSFER (EFT)

1. I, (Claimant's Name) .....
2. NSSF Number .....

**Hereby request you to pay me my benefit through electronic funds transfer**

3. Bank Name .....
4. Branch .....
5. Bank code .....
6. Account Number .....
7. ID /Passport Number .....
8. Mobile phone NO 07.....
9. Email Address.....
10. Postal Address .....
11. **Copy of ATM/Bank Account Card.**

**SF/BEN/EFT/DF/007**



**Left thump print**



REF:

Date

TO

.....

ADDRESS .....

CITY/TOWN.....

Dear Sir,

FM NO.....

BENEFIT TYPE.....

The fund has resolved to pay all pending and future benefits claims directly to the claimant’s bank account through electronic funds transfer (EFT) to ensure faster processing of benefit claims.

To enable us realize the objective of this noble initiative, you are kindly requested to go to the nearest NSSF office to complete the E.F.T authority form as soon as you can. Remember to carry with you the original and copy of your ATM/Bank Card.

We thank you very much for your patience and corporation.

OFFICER NAME

**FOR MANAGING TRUSTEE**

**National Social Security Fund**

Social Security House, Bishops Road, P.O. Box 30599-00100, Nairobi

Landlines: 2729911/ 2710552

Email: info@nssfkenya.co.ke