VOLUNTARY APPLICATION FORM

3rd Floor, MURBS Building / Postal: P.O. Box 9268 – 40141, Kisumu

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Email: info@masenorbs.or.ke/ Website: www.masenorbs.or.ke

To: THE FINANCE OFFICER,
MASENO UNIVERSITY,
PRIVATE BAG,
MASENO

Dear Sir/Madam,

RE: AUTHORITY FOR SALARY DEDUCTIONS TOWARDS ADDITIONAL VOLUNTARY CONTRIBUTIONS (AVC)

I, …… of Payroll number ……
Insert Full names

do hereby authorize you to deduct Kenyan Shillings(Kshs.)……

(Amount In words)……

from my salary with effect from the month of ……20……and remit the same to the Pensions Manager towards my Additional Voluntary Contributions (AVC).

Signed: …… Date: ……

Cc: PENSIONS MANAGER,
MASENO UNIVERSITY RETIREMENT BENEFITS SCHEME,
P.O.BOX 9268,
KISUMU