



PRMS VARIATION 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 TO VARY MY SALARY DEDUCTIONS TOWARDS POST-RETIREMENT MEDICAL SCHEME (PRMS)

I, of Payroll number
Insert Full names

do hereby authorize you to increase/decrease my PRMS deductions from Kenyan
Shillings(Kshs.).....to Kenyan Shillings(Kshs.).....

from my salary with effect from the month of 20.....and remit
the same to the Pensions Manager towards my Post-Retirement Medical Scheme
Contributions (PRMS). My new monthly PRMS deduction should therefore be Kenyan
Shillings (Kshs.)..... (Amount In words).....

Signed:

Date:

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