

Schedules to the KEPSS Rules and Regulations

Schedule G– Contingency Event Record

[Insert Name of participant].....Month

No.	Date of Event	Time of Event	Nature of Problem	Action taken	Time of Rectification
1.					
2.					
3.					

Submit this report at the end of each month to the KEPSS Support at kepss@centralbank.go.ke

Signed for and behalf of

By the duly authorized Signatories

Name

Designation.....

Signature

Name

Designation.....

Signature