po box 8417 roggebaai 8012

tel: 0860 00 44 01 fax: 0860 00 44 02



NOMINATION OF BENEFICIARIES

To be completed by all members of the Pension Fund				
SECTION 1 – DETAILS	OF MEMBER			
Full Names and Surname of Member				
Member's Reference Number at Employer				
3. Member's Reference Number at Fund				
4. Member's Home Address				
SECTION 2 – DETAILS	OF EMPLOYER			
1. Name of Municipality	/ SAPS			
SECTION 3 – BENEFIC	IARY DETAILS			
I, the undersigned members of my death whilst	per, hereby nominate the factorial still a member of the fund	following person/s to red	ceive my fund benefits in the	
3.1 Financial Dependa	ants			
Name	Relationship to Member	Percentage Payable	Dependant's Date of Birth	
3.2 Non-financial Dep	endants		,	
Name	Relationship to Member	Percentage Payable	Dependant's Date of Birth	

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SECTION 4 - SIGNATURES

This form supersedes any pr	evious nominat	ion made by me.	
Signed at	on this	day of	20
Member's signature		Witness's signature	
Member's name		Witness's name	

DISPOSAL OF LUMP SUM DEATH BENEFITS

By law, death benefits must be paid to the following persons:

- 1. Any dependants, for example: spouse, minor children or any person actually dependent on you.
- 2. Any beneficiary nominated by you in writing, for example: any children no longer actually dependent (self-supporting children) or any other person who you want to receive part of the benefit.

Benefits payable by the Fund in respect of a deceased member normally do not form part of his estate and will therefore not be distributed in terms of his will.

The trustees must, in terms of the law, ensure that benefits are paid to the member's dependants in proportions they judge to be fair.

Although the trustees make the financial decision as to how the benefits will be distributed, your nomination will be an important guide to them.

You may nominate people not legally dependent on you, such as a self-supporting child.

If you do not nominate such a person, he/she cannot receive a portion of your lump sum benefits.

This nomination is made:

- 1. Subject to the condition that you may, at any time, amend or withdraw it.
- 2. Conditional upon the fact that should any person that you have nominated die before you, the nomination of that person shall lapse and his/her estate or heirs shall have no claim against the Fund for benefits in terms of this nomination.
- 3. If no proportion is mentioned, it will be assumed that the intention is for an equal split between the persons nominated.
- 4. Where the proportions do not add up to 100%, the trustees will use their discretion in allocating any shortfall.

IMPORTANT

NOMINATIONS SHOULD BE REVIEWED REGULARLY

ENSURE THAT THIS FORM IS RETURNED TO YOUR HUMAN RESOURCES DEPARTMENT