

# FundsAtWork Umbrella Funds beneficiary nomination form

Member number

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Please complete the fields provided. Use the tab key to move from one field to the next.

Please note that this form must be completed if you are a member of the FundsAtWork Umbrella Fund. If you are a member of the FundsAtWork stand-alone insurance scheme, a beneficiary nomination form for stand-alone insurance scheme must be completed. (MEB070)

You may nominate any person to receive any part of the benefit that will be paid from the Fund if you die. This should include your spouse or partner, your children, any person that is financially dependent on you or any person that you want to receive a part of your benefit.

The trustees of the FundsAtWork Umbrella Funds have a duty under the Pension Funds Act to distribute the benefits equitably between your beneficiaries, taking the provisions of the Pension Funds Act into account. This means that even though the trustees will take your nomination into account when making a distribution, they have to distribute the death benefit in line with the Pension Funds Act. There is a difference between how the benefit from a fund is distributed and for example a will, where the benefits are paid exactly to whom you have specified.

## Section 1: Member details

Name of Fund	FundsAtWork Umbrella Pension Fund <input type="checkbox"/>	FundsAtWork Umbrella Provident Fund <input type="checkbox"/>										
Employer name	<input type="text"/>											
Member Surname	<input type="text"/>	Member full names <input type="text"/>										
Date of birth	<table border="1"> <tr> <td>D</td><td>D</td><td>-</td><td>M</td><td>M</td><td>-</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>		D	D	-	M	M	-	Y	Y	Y	Y
D	D	-	M	M	-	Y	Y	Y	Y			
Member reference number	<input type="text"/>	ID/Passport number <input type="text"/>										
Home telephone number	<input type="text"/>	Cellphone number <input type="text"/>										
Email address	<input type="text"/>											
Marital status	Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/>											

## Section 2: Beneficiary details

I hereby nominate the following persons for any benefits due to be paid from the FundsAtWork Umbrella Fund in the event of my death:

	Surname	Full names	Title	ID/Passport number	Contact telephone number	Relationship (e.g. spouse, partner, daughter, son, mother, friend, etc.)	Financially dependent on you (Y/N)	% Share
Dependants							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
Nominees							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
							Yes <input type="checkbox"/> No <input type="checkbox"/>	
Very important – the column on the right MUST add up to 100%								100%

If there is additional information that you want the trustees to consider when making a decision on the distribution of your benefit, complete the notes field below.

Notes:

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### Section 3: Member's signature

If your circumstances change, for example if you get married or divorced or have a child or a beneficiary dies, and you want to change your beneficiary details, you must complete a new form. You may also log onto our website at [www.momentum.co.za](http://www.momentum.co.za) and change your beneficiary nomination electronically.

By signing this you declare that you understand that this nomination cancels all previous nominations, if any, that you have made with respect to your membership of the abovementioned scheme.

Signed at

Member's signature

Date    -    - 2 0

Fax the completed form to 012 675 3970 or email to [clientcontactcentre@momentum.co.za](mailto:clientcontactcentre@momentum.co.za). Please send a copy of this form to your human resources department to be kept in your file.

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When you sign this form by inserting a digital signature, it confirms that the information provided is true and correct.

#### Options to sign the form:

1. Print out the form, sign and scan it and send it back via email to [clientcontactcentre@momentum.co.za](mailto:clientcontactcentre@momentum.co.za) or fax it to +27 (0)12 675 3970.
2. Place your scanned signature in the signature block.
  - Store your scanned signature in a safe place on your computer.
  - Select the 'comments' tab from your menu in Adobe.
  - Select the 'add stamp' icon.
  - Select custom stamps.
  - Create custom stamps.
  - You can now browse and upload your signature to save it as a custom stamp under 'sign here' in Adobe.
  - You can now go back to your 'stamps' icon and select 'sign here' and select your saved signature.
  - Place it in the document and save the document.

When you want to print the form to complete by hand you can turn off the field highlights by selecting the "highlight existing fields" on the top right hand corner of your screen.

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## **Nominating beneficiaries for your death schemes:**

Should you die while you are still a member of the FundsAtWork Umbrella Fund, a death benefit will be paid to your beneficiaries. The benefit consists of a lump sum insurance death benefit (if applicable plus your Retirement Savings Account balance in the Fund). Please refer to your member benefit statement on [www.momentum.co.za](http://www.momentum.co.za) for more information.

### **Step 1: List your dependants and nominees**

1. First list the details relating to your spouse in the space provided. If you have more than one spouse, a customary law spouse or a life partner (i.e. someone with whom you live as if married), please include their details.
2. Next, list ALL your children, even those who are already majors, including those adopted, those from previous marriages or those born outside of marriage. Include the name of the person that will be the guardian of your minor children, should you die.
3. Now list any legal dependants, such as a divorced spouse from a previous marriage to whom you are paying maintenance, or anyone else who you would be obliged to maintain financially (for example a minor child, a major child that is still studying or an aged parent).
4. Finally, if there is anyone else who is not dependent on you whom you would like to receive a part of your benefit, list these beneficiaries under “Nominees” on page 2.

### **Step 2: Divide the benefit**

After you have listed your dependants and nominees, you need to decide how much (if any) of your benefit you would like them to receive. Keep in mind that –

- The more beneficiaries you choose to receive a share, the smaller each individual’s benefit may be.
- The percentages in the ‘% Share’ column must add up to a total of 100%.

### **Step 3: Give additional motivation**

To distribute your benefit as fairly as possible, it would help the Trustees to understand why you have proposed the specified allocations to your beneficiaries. For example, you may propose that one minor child receives a large share while the other minor child receives nothing, if the one is disabled and the other has a bursary to cover their study expenses. Write your motivation(s) in the notes box on page 2. It will assist the Trustees in understanding the reasons for your allocation.