

FundsAtWork Umbrella Funds

Divorce order claim form by non-member spouse

Member number

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Please fill in this form in the fields provided. Use the tab key to move from one field to the next.
The following documents must accompany this application

- Copy of the divorce order.
- Copy of the complete settlement agreement.
- Copy of member's ID / Passport (If you have an identity card, please submit a copy of the front and back of the card)
- Copy of the non-member spouse's ID / Passport (If you have an identity card, please submit a copy of the front and back of the card).

Section 1: Fund and employer details

Name of fund

Name of employer

Section 2: Member details

Title Initial/s First name

Surname

Date of birth - -

RSA ID Yes No Identity number

Telephone - work

Telephone - home Cellphone number

Email address

Section 3: Non-member spouse details

Title Initial/s First name

Surname

Date of birth - -

RSA ID Yes No Identity number

Residential address

Postal address

Income tax number

Telephone - work Fax

Telephone - home Cellphone number

Email address

Section 4: Withdrawal details and options

I want to:

take the benefit as a lump sum (the benefit will be subject to tax)

transfer the benefit to an approved pension fund, approved pension preservation fund or approved retirement annuity fund

Transfer benefit to an approved provident fund or approved preservation fund

Note: Benefit transfer from a pension fund to a provident will be subject to tax.

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Section 4a: Bank account details (if a lump sum payment was selected)

Note: A lump sum payment will be subject to tax

Name of account holder (ex-spouse)	<input type="text"/>																	
Bank name	<input type="text"/>																	
Account type	Current/Cheque	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Transmission	<input type="checkbox"/>												
Account number	<input type="text"/>									Branch code	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>

Section 4b: Transfer details (if transfer was selected)

Name of receiving fund	<input type="text"/>																	
Bank name	<input type="text"/>																	
Branch	<input type="text"/>																	
Account type	Current/Cheque	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Transmission	<input type="checkbox"/>												
Account number	<input type="text"/>									Branch code	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
Financial adviser's name	<input type="text"/>																	
Financial adviser's Telephone work	<input type="text"/>																	
Financial adviser's email address	<input type="text"/>																	

Note:

- A transfer of benefits to another approved fund will not attract any tax.
- While this claim is being processed, the benefit will be placed in Momentum FundsAtWork's bank account in order to eliminate the possibility of the benefit being reduced due to volatile market conditions.

Section 5: Declaration by non-member spouse

I (full names)

declare that:

- all particulars furnished in this form are true and correct;
- payment by electronic transfer shall constitute full and final settlement discharging Momentum FundsAtWork of its liability.

I agree that Momentum Corporate may process all information that I provide on this form. I understand that the information will be processed in accordance with the Protection of Personal Information Act, 2013 and Momentum Corporate's strict policies on protecting the confidentiality of my personal information.

I agree that Momentum Corporate may use my personal information to provide and administer retirement fund investment and insurance products and share my personal information with Momentum Corporate's partners and contracted service providers, who are legally bound to protect the information.

[Click here](#) to read the full consent document.

Signed at

Name

Signature	<input type="text"/>	Date	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: 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 momentumcorporateclient@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.