

Beneficiary nomination form for members of the FundsAtWork Umbrella Funds

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You should complete this form if you are a member of the FundsAtWork Umbrella Pension Fund and/or Provident Fund to nominate beneficiaries for the benefits paid by the FundsAtWork Umbrella Funds. You can also nominate beneficiaries for the unapproved lump sum death benefit and funeral benefit paid by the separate group insurance benefit schemes provided by your employer.

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

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Section 1: Member details								
Employer name								
Member's title			Initials	First r	name(s)			
Member's surname								
Date of birth	D D -	M	- Y Y	YY				
RSA ID	Yes	No	II	D/passport number			Passport country of origin	
Status	Single	э	Marrie	d Divorced	Separated	Widow/widower	Permanent life partner	
Contact number								
Email address								

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Section 2: FundsAtWork Umbrella Pension Fund

Please complete this section if you belong to the FundsAtWork Umbrella Pension Fund.

This beneficiary nomination will be used for the benefits paid from the FundsAtWork Umbrella Pension Fund.

You may nominate any natural person (human being) to receive any part of the benefit that will be paid from the FundsAtWork Umbrella Pension Fund if you pass away. This could 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 Pension Fund have a duty under the Pension Funds Act to distribute your death benefit 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, they will not be bound by it because they must distribute the death benefit in line with the Pension Funds Act.

Beneficiary details

I nominate the following people for any benefits due to be paid by the FundsAtWork Umbrella Pension Fund if I pass away.

Surname	First name(s)	Title	ID/passport number	Date of birth	Contact number of beneficiary	Relationship (eg spouse, partner, daughter, son, mother, friend)	Financially dependent on you (Y/N)	% Share
							Yes No	
							Yes No	
							Yes No	
							Yes No	
							Yes No	
							Yes No	
							Yes No	
							Yes No	
							Yes No	
							Yes No	
Please make sure that the column on the right a	adds up to 100%.					·	·	100%

- A nominated beneficiary who passes away before you will not be entitled to receive any benefits you nominated them for in this beneficiary nomination form.
- To distribute your benefits as fairly as possible, it would help the trustees of the FundsAtWork Pension Fund to understand why you have proposed certain share allocations to your beneficiaries. For example, a member 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 in the field below to help the trustees understand the reasons for your allocation.
- · When you provide contact numbers for your beneficiaries, make sure you provide their numbers, not yours, so that we can reach them if you pass away.
- · If there is any additional information that you would like us to know about, please also add this information in the field below.

Section 3: FundsAtWork Umbrella Provident Fund

Please complete this section if you belong to the FundsAtWork Umbrella Provident Fund.

This beneficiary nomination will be used for the benefits paid from the FundsAtWork Umbrella Provident Fund.

You may nominate any natural person (human being) to receive any part of the benefit that will be paid from the FundsAtWork Umbrella Provident Fund if you pass away. This could include your spouse or partner, your children, and 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 Provident Fund have a duty under the Pension Funds Act to distribute your death benefit 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, they will not be bound by it because they must distribute the death benefit in line with the Pension Funds Act.

You may tick this box if you have already made a nomination for the FundsAtWork Umbrella Pension Fund, and would like to make the identical nomination for the FundsAtWork Umbrella Provident Fund. If you tick this box, you don't have to complete the nomination below.

Beneficiary details

I nominate the following people for any benefits due to be paid by the FundsAtWork Umbrella Provident Fund if I pass away.

Surname	First name(s)	Title	ID/passport number	Date of birth	Contact number of beneficiary	Financially dependent on you (Y/N)	% Share
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
Please make sure that the column on the right a	adds up to 100%.						100%

- A nominated beneficiary who passes away before you will not be entitled to receive any benefits you nominated them for in this beneficiary nomination form.
- To distribute your benefits as fairly as possible, it would help the trustees of the FundsAtWork Provident Fund to understand why you have proposed certain share allocations to your beneficiaries. For example, a member 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 in the field below to help the trustees understand the reasons for your allocation.
- When you provide contact numbers for your beneficiaries, make sure you provide their numbers, not yours, so that we can reach them if you pass away.
- · If there is any additional information that you would like us to know about, please also add this information in the field below.

Section 4: Unapproved lump sum death benefit

Please complete this section if you belong to a separate unapproved lump sum death benefit scheme provided by your employer. This beneficiary nomination will only be used for the unapproved lump sum death benefit paid from the insurance scheme provided by your employer. An unapproved benefit is provided by your employer and not a pension or provident fund.

The death benefit payable under the unapproved lump sum death benefit scheme will be paid to the beneficiaries you nominated.

You may nominate any natural person (human being) to receive any part of the benefit that will be paid from the death benefit scheme if you die. This could 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. You may also nominate a legal entity like a charity, a business or a trust for example, but you may not nominate your employer.

You may tick this box if you have already made a nomination for the FundsAtWork Umbrella Pension Fund, and would like to make the identical nomination for the unapproved lump sum death benefits. If you tick this box, you don't have to complete the nomination below.
You may tick this box if you have already made a nomination for the FundsAtWork Umbrella Provident Fund, and would like to make the identical nomination for the unapproved lump sum death benefits. If you tick this box, you don't have to complete the nomination below.

Beneficiary details

I nominate the following people and/or entities for the benefit due to be paid by the unapproved lump sum death benefit scheme if I pass away.

Full name(s) and surname (for a natural person) or full registered name (for a legal entity)	Title	ID or passport number (for a natural person) or registration number (for a legal entity)	Date of birth	Contact number of beneficiary	Relationship (eg spouse, partner, daughter, son, mother, friend)	% Share
Please make sure that the column on the right adds up to 100%.						

- · Where you have nominated a legal entity, you don't need to fill in the fields for title, date of birth or relationship.
- If you have nominated a minor child, but would like the benefit to be paid to a beneficiary fund or a trust, please provide the full details in the field below.
- If you have nominated a minor child, the contact number must be the number of an adult legal guardian.
- · When you provide contact numbers for your beneficiaries, make sure you provide their numbers, not yours, so that we can reach them if you pass away.
- · If there is any additional information that you would like us to know about, add this information in the field below.

Section 5: Family Protector funeral benefits

Please complete this section if you belong to the Family Protector funeral benefit scheme.

This beneficiary nomination will be used for the Family Protector funeral benefit.

The funeral benefit payable under the Family Protector scheme will be paid to the beneficiary you nominated.

You may nominate any natural person (human being) to receive the funeral benefit that will be paid from the Family Protector scheme if you pass away. This could include your spouse or partner, or any person that you want to receive your benefit. You may also nominate a legal entity like a charity, a business or a trust for example, but you may not nominate your employer. Consider nominating the person who will arrange and pay for your funeral, who should ideally be 18 or older.

Beneficiary details

I nominate the following person or entity to receive the funeral benefit payable under the Family Protector funeral benefit scheme if I pass away.

Full name(s) and surname (for a natural person) or full registered name (for a legal entity)	Title	ID or passport number (for a natural person) or registration number (for a legal entity)	Date of birth	Contact number of beneficiary	Relationship (eg spouse, partner, daughter, son, mother, friend)

If the beneficiary I nominated above passes away before me or is unable to receive the benefit, I nominate the following person or entity to receive the benefit instead.

Full name(s) and surname (for a natural person) or full registered name (for a legal entity)	Title	ID or passport number (for a natural person) or registration number (for a legal entity)	Date of birth	Contact number of beneficiary	Relationship (eg spouse, partner, daughter, son, mother, friend)

- Where you have nominated a legal entity, you don't need to fill in the fields for title, date of birth or relationship.
- · When you provide contact numbers for your beneficiary, make sure you provide their numbers, not yours, so that we can reach them if you pass away.
- If there is any additional information that you would like us to know about, add this information in the field below.

ection 6: Funeral benefits					
lease complete this section if you belong to a funeral benefit scheme in addition to the	funeral benefit pr	ovided under Family Protecto	r.		
his beneficiary nomination will be used for the funeral benefit. The funeral benefit will b	e paid to the ben	eficiary you nominated.			
ou may nominate any natural person (human being) to receive the benefit that will be pou, or any person that you want to receive your benefit. You may also nominate a legal ill arrange and pay for your funeral, who should ideally be 18 or older.					
You may tick this box if you have already made a nomination for the Family Protect have to complete the nomination below.	tor funeral benefit	t and would like to make the id	dentical nomination	for the additional funeral b	enefit. If you tick this box, you don't
eneficiary details					
nominate the following person or entity to receive the funeral benefit payable if I pass a	away.				
Full name(s) and surname (for a natural person) or full registered name (for a legal entity)	Title	ID or passport number (for a natural person) or registration number (for a legal entity)	Date of birth	Contact number of beneficiary	Relationship (eg spouse, partner, daughter, son, mother, friend)
the beneficiary I nominated above passes away before me or is unable to receive the	benefit, I nominat	e the following person or entit	y to receive the ber	efit instead.	
Full name(s) and surname (for a natural person) or full registered name (for a legal entity)	Title	ID or passport number (for a natural person) or registration number (for a legal entity)	Date of birth	Contact number of beneficiary	Relationship (eg spouse, partner, daughter, son, mother, friend)

Section 7: Member's signature

I declare that I understand that this beneficiary nomination cancels all previous nominations, if any, that I have made with respect to my membership of the FundsAtWork Umbrella Funds, and/or the death and/or funeral benefits under the insurance scheme/s provided by my employer.

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

Click here to read the FundsAtWork Umbrella Funds full privacy notice. Click here to read the full privacy notice for Momentum.

Signed at		
Member's signature	Date	D - M M - 2 0 Y

Please send a copy of this form to your employer's human resources department to be kept in your file.

If your circumstances change, for example you get married or divorced, or have a child, or a nominated beneficiary dies, and you want to change your beneficiary details, you must complete a new beneficiary nomination form. You may also log on to our website at www.momentum.co.za and change your beneficiary nomination electronically, if you have the facility.

Options to sign the form:

- 1. Print out the form, complete it and sign it. Then scan it and sent it by email to your human resources department or to momentum.corporateclient@momentum.co.za.
- 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.
 - Send the document by email to your employer's human resources department or to momentum corporate client@momentum.co.za.

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

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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