



SEYCHELLES PENSION FUND

NOMINATION OF BENEFICIARIES

CONFIDENTIAL

To be completed where applicable

EMPLOYEE NAME:.....

EMPLOYEE NIN:.....

EMPLOYEE ADDRESS:.....

In case of death before retirement, I hereby nominate my child/children to receive an amount of between 25% and 49% of the pension of my surviving spouse.

This means that the surviving spouse pension will be reduced by that percentage and added to the children's pension.

1. Children

Name	Address	NIN Number	Share %

In case of death before retirement, I hereby nominate my child, children, or surviving spouse or any other person specified below to receive my voluntary contribution, if any standing to my credit in the Pension.

2. Voluntary Contribution

Name	Address	Relationship	NIN Number	Share %

In case of death before retirement where is no surviving spouse or children under the age of 18 or over the age of 18 attending full time studies, I hereby surrender the balance of mandatory and voluntary contributions, standing to my credit in my account in the fund to the following persons:-

3. Beneficiary

Name	Address	NIN Number	Share %

This nomination is valid for a period ofuntil my death.

Signature (Employee):.....

(1) Witness:.....

Date:.....

Date:.....

(2) Witness:.....

Date:.....

Note: Two witnesses are required and they must be 18 years old and above and must not be the member/nominee (s)