GQM
Fund Administrators (Pty) Ltd
Quality Managed Retirement Fund Administration Services

Funded Death Benefit Claim

A. MEMBERSHIP DETAILS

Employer Name			
Fund Name			
Member's Full Names and Surname			
ID / Passport Number			
Date of Birth		Member Tax Number	
Member Number		Date of last contribution	
Date Joined Fund		Date of Death	
Residential Address		Postal Address	

B. DEDUCTION DETAILS

- Detail of any outstanding home loan for this member :_____
- Details of any divorce order passed against the member : _____

C. DOCUMENTS TO BE ATTACHED

Please note that the following documents should be attached

1. Copy of Members identity document
2. Dependant and Beneficiary Nomination Form
3. Original certified copy of death Certificate
4. Original certified copy of marriage certificate or any proof of marriage
5. Original certified copies of identity document of all beneficiaries
6. Deceased – Information Form
7. Declaration by or in respect of potential beneficiary

Funded Death Benefit Claim

D. DEATH CLAIM INVESTIGATION NOTES

Please provide any information you are aware of that is important to this claim or information you believe might assist the trustees with the distribution of benefits.

Company Stamp

_____ **Authorised Signatory**

_____ **Date**

Disclosure of information

GQM and the fund understand privacy and the confidentiality of personal information. If required, we may disclose your personal information to 3rd parties. These 3rd parties are insurance and service providers who are involved in the delivery of products or services to you. The same strict confidentiality standards are imposed on 3rd parties. Signing of this form confirms acknowledgement and consent to the above. We will treat personal information with caution and have security measures in place to protect it. The information provided will be used for intended purpose only. Such purposes include fund and related communications. We may also disclose your information:

- Where we have a duty or a right to disclose in terms of law or industry codes;
- Where we believe it is necessary to protect our rights.

Where the person signing this document is someone other than the person whose personal information is being supplied, such signatory confirms that the necessary consent has been obtained to supply personal information and that the information is true and correct.