

FUNERAL CLAIM FORM - SANLAM SCHEME CODE I5883

The purpose of this form is for the employer to notify the Fund of either the death of a member or the death of a member's dependant. The submission of this completed form will initiate the lodging of a funeral claim with the insurer.

MEMBER'S PERSONAL DETAILS

Title Dr Mr Mrs Ms Prof

Fund membership number

Surname First names

Date of birth Identity number

Gender Marital status

Date of becoming an assured under the fund

DECEASED'S DETAILS

Relationship to member: Member Spouse Child

Surname First names

Date of birth Gender

Marital status Date of marriage

Date of death Cause of death

EMPLOYER DETAILS

Name of employer

Deceased member's last active date in service (if applicable)

Final pensionable salary as at date of death R

PAYMENT INSTRUCTIONS

BENEFICIARY'S CONTACT DETAILS

Surname First names

Date of birth Identity number

Residential address

Postal code

Postal address

Postal code

Home telephone number Work telephone number

Cell phone number Facsimile number

Email address

BENEFICIARY'S BANKING DETAILS

The total amount of the funeral claim is to be deposited into the following bank account:

Name of account holder

Name of bank

Branch name Branch code

Type of account Account number

EMPLOYER DECLARATION

It is hereby confirmed and warranted that the information contained herein is correct and, in particular, that the beneficiary's banking details provided above, have been confirmed as correct. The employer hereby unconditionally absolves the Fund and Verso Financial Services (Pty) Ltd and as necessary indemnifies and keeps indemnified the Fund and Verso Financial Services (Pty) Ltd from and against all or any loss, damage, cost and expenses which the beneficiaries, or any other person whatsoever, may sustain or incur, either directly or indirectly as a result of Verso Financial Services (Pty) Ltd, on behalf of the Fund, relying on and using any information supplied by the employer.

Full name of authorised official of the employer

Work telephone number Facsimile number

Email address

Signature of authorised official of the employer

Date

EMPLOYER STAMP

DOCUMENTATION REQUIRED

- An original certified copy of the original death certificate (BI-5 and/or BI-20).
- An original certified copy of the deceased ID Document.*
- An original certified copy of the birth certificate of the deceased (if a minor).
- An original certified copy of the marriage certificate (if a common law/customary marriage an affidavit is required. The affidavit must state the length of the relationship between the deceased and the common law/customary spouse).
- An original certified copy of Identity Document of the person to whom the funeral benefit will be paid.
- Receipt from funeral parlour (if applicable).
- Letter from doctor/specialist to be attached regarding still born child, confirming duration of pregnancy.
- Notice/Register of Death (BI-1663), obtainable from Home Affairs.

* If copies of ID smart cards are provided, please provide certified copies of both the front and reverse sides of the cards.

PROCESSING OF PERSONAL INFORMATION

The Fund is committed to the adherence and compliance of the Protection of Personal Information Act (POPIA) and is committed to ensuring the protection of the Personal Information of Members and Fund Officers. This commitment is encompassed in the Fund's Data Protection and Privacy Policy which ensures that the Fund and its Service Providers Process Personal Information responsibly and in a manner that demonstrates their commitment to upholding the right to privacy of Members and Fund Officers, subject to justifiable limitations.

It further establishes a common standard on the appropriate protection of Personal Information of Members and provides general principles regarding the right of individuals to privacy and to reasonable safeguarding and protection of their Personal Information. The Board of Management, in its commitment to comply with POPIA, requires that the Fund's Service Providers adhere to the lawful Processing of Personal Information in line with POPIA. The Data Protection and Privacy policy therefore also specifies minimum requirements and standards that are to be adhered to with regards to the Processing of Personal Information by Service Providers of the Fund.

The Fund has concluded written agreements with its service providers and will ensure that your personal information is protected through adequate provisions in these agreements. If any of the Fund's service providers are abroad, the Fund will not share your personal information with them, unless we are satisfied that they have adequate security measures in place to protect your personal information.

The Fund may use your information or obtain information about you for the following purposes:

- Underwriting in respect of Fund risk benefits
- Assessment and processing of Fund benefit claims
- Member communication
- Verification of personal information
- Claims checks (industry Life & Claims Register)
- Tracing beneficiaries

- Fraud prevention and detection
- Market research and statistical analysis
- Audit & record keeping purposes
- Compliance with legal & regulatory requirements
- Verifying your identity
- Updating your personal information
- Sharing information with service providers we engage to process such information on our behalf or who render services to the Fund.

You may access your personal information that we hold and you may also request us to correct any errors or to delete this information. In certain cases you have the right to object to the processing of your personal information.