

CLAIM NOTIFICATION

**TO BE COMPLETED IN THE EVENT OF A MEMBER'S
WITHDRAWAL / RETRENCHMENT / RETIREMENT / DEATH**

Please attach the following documents:

- ✦ A copy of ID / Passport.
- ✦ A copy of your bank statement or bank letter not older than three months, or a cancelled cheque.

Note:

- ✦ This claim notification form must be **fully completed**.
- ✦ Your Retirement Account (Fund Credit) remains invested in the portfolio you were invested in prior to exiting and until such time as final payment is made.
- ✦ Consider transferring your Fund Credit (or a portion of it) tax-free to the Destiny Preservation Fund.
- ✦ If available, consider exercising the option to continue your insured benefits under an individual policy.
- ✦ Should you wish to continue to contribute to Destiny, complete a Destiny Retirement Annuity Fund form which you can obtain via www.destinyfund.co.za or email a GIB advisor at destiny@gib.co.za.

1. MEMBER DETAILS

- a) Participating Employer & Branch
- b) Full name
- c) ID or Passport number
- d) Date of birth
- e) Income tax reference number
- f) Residential address
- g) Postal address
- h) E-mail address
- i) Contact tel. no
- j) Date joined fund
- k) Date joined company

l) Type of exit	resignation	dismissal	retrenchment	retirement	death
	other	If other:			

- m) Date of Exit
- n) Last contribution for month of
- o) Member's monthly taxable salary at date of exit
- p) Does the member have an outstanding pension backed lending home loan? Y N
- q) Are there any benefits due to a spouse in terms of a divorce order? Y N
- r) Are there any benefits due in terms of a maintenance order? Y N
- s) Are there any benefits due to the employer in terms of S37D of the Act (if so please complete the Acknowledgement of Debt form). Y N

2. EXIT TYPE

i) RESIGNATION / DISMISSAL / RETRENCHMENT

NB. The Trustees of Destiny urge you to preserve your accumulated fund value. Therefore, consider transferring **tax-free** to the Destiny Preservation Fund. Alternatively, transfer to your new employer's Pension / Provident Fund, if available. Cash withdrawals are subject to tax.

a) Transfer tax-free to the Destiny Preservation Fund. (visit www.destinyfund.co.za for forms or a GIB/Destiny representative can contact you to finalise)

b) Take a portion of the withdrawal benefit in cash and transfer the balance to the Destiny Preservation Fund.

Indicate the Rand amount / percentage you wish to withdraw in cash R or %

c) Transfer to another Preservation / Pension / Provident Fund / RA Fund.

Fund Name / Policy Number

Contact Details

d) Take a portion of the withdrawal benefit in cash and transfer the balance to another Preservation / Pension / Provident Fund / RA Fund.

Fund Name / Policy Number

Contact Details

Indicate the Rand amount / percentage you wish to withdraw in cash R or %

e) Take the Share of Fund in cash after tax payable that will be confirmed by the SA Revenue Services.

Do you wish to exercise an option to **continue your insured benefits** under an individual policy? (If yes then please contact your financial adviser or GIB representative to discuss).

Y N

If you wish to continue to contribute to Destiny then complete a **Destiny Retirement Annuity** form via www.destinyfund.co.za or email a GIB Advisor at destiny@gib.co.za.

ii) RETIREMENT

The Member is to retire in accordance with the following provisions of the Rules (please contact a GIB representative at destiny@gib.co.za if you require assistance):

a) Attainment of Normal Retirement Age (NRA). Please complete further instructions hereunder.

b) Attainment of NRA and elect to leave the benefit in the Fund until a future date.

c) Early Retirement due to ill-health.

d) Early Retirement with consent of the employer.

Do you require further information regarding purchasing an annuity (income)?

Y N

Further instructions

iii) DEATH

Benefit to be paid to (Please attach copy of Beneficiary Nomination Form):

Name	Relationship	% Benefit

Documentation required:

Death Certificate (original or certified copy)
Proof of Age (Birth Certificate or ID document)
Proof of relationship of beneficiaries (Marriage / Birth Certificates)

3. PAYMENT DETAILS

Payments are made electronically into your bank account. It is therefore essential that correct and accurate details are provided. GIB / Destiny cannot be held responsible if details are incorrect. Payment can only be made to an account in your name.

Name of Account Holder

Name of Bank

Branch

Branch Code

Account No.

Upon payment in terms of the above instructions, the Fund shall have no further liabilities in respect of the member.

Member Signature

Date

Employer Authorised Signatory

Date

COMPANY STAMP

PLEASE REMIT TO:

GIB Financial Services
destiny@gib.co.za / 011 483 1212
P.O. BOX 3211, HOUGHTON, 2041
GIB House, 3 West Street Houghton