

2. ELECTRONIC DATA REQUIRED IN EXCEL FORMAT

Member surname		Date of birth		Total member fund value	
Member first name		ID or passport number		Employer contributions	
Gender		Marital status		Member contributions - Pre 2017 tax year	
Investment growth				Member contributions - Post 2017 tax year	

* Please include any other information that can assist with the tracing of beneficiaries and/or dependants.

Initial

3. PAYMENT DETAILS

Electronic funds transfer/direct deposit
All payments should be made payable to:

	Distinction Unclaimed Benefit Preservation Pension Fund	Distinction Unclaimed Benefit Preservation Provident Fund
BANK	FNB	FNB
GENERIC CODE	25-06-55	25-06-55
ACCOUNT NO	622 3602 3537	622 360 28131

Please note that your fund name must be quoted as the reference for all payments.

4. DOCUMENTATION REQUIRED

The transferor fund undertakes to provide Fedgroup Employee Benefits with the following in order to complete the transfer:

1. Form H
2. Form J
3. Proof of member communication (resolved any objections)
4. Proof of valuation exemption
5. Proof that registrar is satisfied with requirements of surplus schemes (If applicable)

On completion please send this form and supporting documentation to the details below:

F: 011 305 2495
E: GBcontact@fedgroup.co.za
Postal address: PO Box 782823, Sandton, 2146.

_____ FUND (the "Fund")

RESOLUTION TO UTILISE THE FEDGROUP UNCLAIMED BENEFIT PRESERVATION PENSION/PROVIDENT FUND

The trustees of the _____ Fund resolved on _____
that, with effect from _____ 20 ____ :

The following unclaimed benefit be transferred into the Fedgroup Unclaimed Benefit Preservation Pension/Provident Fund (as appropriate):

1. Benefits legally payable to members or former members, but which have been unpaid for a period of 24 months after the date of exit in terms of the fund's rules.
2. Death benefits not paid to beneficiaries within 24 months of such benefits becoming due and payable.
3. Pension instalments unpaid for 24 months from the date that they became payable to pensioners.
4. Surplus payments that cannot be paid to former members/pensioners, within 24 months from the date that such payments fell due.
5. Benefits that are unpaid to members/former members consequent upon the fund terminating/being liquidated after a period of 24 months. (Delete whichever is not applicable to your client)

The trustees mandate Fedgroup Employee Benefits to do all that is necessary to facilitate this decision.

CERTIFIED THAT THE ABOVE RESOLUTION HAS BEEN ADOPTED IN ACCORDANCE WITH THE PROVISIONS OF THE RULES OF THE FUND

Chairperson

Principal officer

Signature

Signature

Employer trustee

Employer trustee

Signature

Signature

Member trustee

Member trustee

Signature

Signature