

The logo for the Municipal Employees Pension Fund is circular. It features a black outer ring with the words "MUNICIPAL EMPLOYEES" at the top and "Pension Fund" at the bottom. Inside the ring, two green hands are shown holding a green silhouette of a family consisting of two adults and two children.

The No. 1 Pension Fund

Private Bag X36

Tel (011) 578-5300

Fax (011) 578-5300

The following documents must accompany this application

- 1. PARTICULARS OF TRANSFERRING FUND:**

2. PARTICULARS OF MEMBER

3. PARTICULARS OF THE MEMBER SPOUSE

A Board of Trustees controls the Municipal Employees Pension Fund. The names of the members of the Board of Trustees are available from the Municipal Employees Pension Fund on request.

4. **WITHDRAWAL DETAILS AND OPTIONS**

Please select one of the following options:

The non-member spouse must make this election and notify the Fund within 120 days.

- ☐ Take the whole benefit in cash
- ☐ Transfer the whole benefit to an approved pension fund, approved pension preservation fund or approved retirement annuity fund.

Indicate the rand amount/percentage you want to transfer to the approved retirement annuity fund R or %

4a: BANK ACCOUNT DETAILS (if cash was selected)

Name of account holder (ex-spouse): _____

Bank name: _____

Account type Current/Cheque Savings Transmission: _____

Account number: _____

Branch code: _____

4b: TRANSFER DETAILS (if transfer was selected)

Name of receiving fund: _____

Bank name: _____

Branch code: _____

Type of account _____

Financial adviser's name _____

Financial adviser's code _____

Financial adviser's contact details: _____

Financial adviser's email address: _____

5. **Declaration by non-member spouse**

I (full names) _____ declare that:

- all particulars furnished in this form are true and correct;
- payment by electronic transfer shall constitute full and final settlement discharging the Municipal Employees Pension Fund of its liability in terms of the Rules of the Fund;
- the benefit payment options available to me, as well as the tax implications thereof, have been explained to me in full.

SIGNATURE

Signed at: _____ on this _____ day of _____ 20____

- *NB:**
1. Please note that the administrator will only process the claim if the divorce order complies with Section 7(8) of the Divorce Act read together with Section 37D of the Pension Funds Act.
 2. The completed form together with the supporting documents must be faxed to 011 578 5300 or emailed to pension@akafin.co.za