

**Indemnity form
 Purchasing a pension from the University of Johannesburg Defined Benefit Pension Fund**

Who must complete this form?

- **Main rules, Annexure A, Annexure B and Annexure C members of the University of Johannesburg Defined Benefit Pension Fund who retire and who elect to buy a pension from the fund**

Instruction and Indemnity by:

Member's full names and surname: (hereinafter referred to as "the Member")	
Member's ID Number:	
and:	
Member's spouse's full names and surname:	
Member's spouse's ID Number:	
In favour of the University of Johannesburg Pension Fund Defined Benefit Pension Fund (hereinafter referred to as "the Fund").	

1. The Member is a member of the Fund, which is administered by Alexander Forbes Administration Services, a division of Alexander Forbes Financial Services (Pty) Ltd ("Alexander Forbes");
2. The Member Spouse is recognised as a spouse of the Member in terms of the Fund Rules;
3. The Member is entitled to receive a retirement benefit in terms of the Rules of the Fund;

4. The Member is entitled to receive an amount in cash equal to the amount below, which represents an amount not exceeding one third (1/3) of his/her retirement benefit. The Member hereby instructs the Fund that he/she wishes to receive such amount to be paid into the Member's banking account the details of which are as follows:

Amount in cash:	R
Account Holder Name:	
Bank:	
Branch code:	
Account number:	

5. There is a spouse's pension payable to the Member Spouse in terms of the Rules of the Fund;

It is thus agreed that:

6. The Member warrants that, to the extent that the Member's Spouse may qualify to receive a pension in terms of the rules of the Fund, that the information provided by the Member in respect of the Member Spouse is correct. The Member and the Member Spouse agree that should any of the Member Spouse information provided to the Fund, that is material to the calculation of the Member's retirement benefit or the Member Spouse's benefit be incorrect, that the Member and the Members Spouse (if applicable), shall have no claim against the Fund in respect of any spouse's or widow's benefit, pension guarantee, pension increase, children's pension, post retirement death benefit, post retirement medical aid and/or any like benefit which is granted to pensioners of the Fund.
7. The Member hereby acknowledges that this instruction has been made at the Member's own request. The Member fully understands the consequences of this instruction;
8. The Member hereby confirms that he/she is represented by a financial adviser and that he/she has received comparative annuity quotes from various registered insurers to allow them to compare the pension benefits from the fund, including pension increases from the fund; to annuity quotes which include clear information about costs and expenses related to the annuities;

Hereby signed by the Member as follows:

Signed at (place):	
This day:	
of the month:	
in the year:	
by the member:	

Hereby signed by the Member Spouse as follows:

Signed at (place):	
This day:	
of the month:	
in the year:	
by the member spouse:	

For UJ Office purposes:

Signature of authorise person at employer or Principal Officer	
Full name:	
Date:	
UJ Stamp:	