

ALEXANDER FORBES FINANCIAL SERVICES (PTY) LTD Reg No. 1969/018487/07 | FAIS Licence no: 1177 A licensed financial services provider

Institutional Funds Administration

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Death Claim - member Unnatural Death Information

The investigating officer at the police station where the death was reported must complete this form. This form is required to confirm a death claim under:

Name	of dec	eased																													
Surna	me																														
Maide	n surn	ame																													
	of deatl							ID	Num	nber	r																				
		MY																													
Place	of dea	th																													
The ex	kact ca	use of	death	(plea	se tio	ck)																									
Accident Murder												5	Suici	de																	
lf a fire	arm w	as use	d was	the c	lece	ase	d th	e 0\	vner	of	the	firea	rm?	,																	
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		est beei		or w	ill on	e be	e he	ld?		-	es		No																		
Is ther	e a su	spect/s								Ye	es		No	_		 _															
Is ther If yes,	e any i please	amilty provid	membe le the r	er tha name	t ha	s be	en i	mp	licate	ed i	n th	e m	urde	er?	Yes	No	C														
Name	of inve	estigatir	ng offic	er																											
Conta	ct num	ber of t	he inve	estiga	ating	offi	cer																								-
Name	of poli	ce stati	on																												
Case	numbe	r																													-
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																		Children Stamp.													
Signat	ure of	investię	gating	office	r										 																
		M	M Y	Y	Y ·	Y																									
Date		M	MY	Y	Y	Y																									

Personal information, privacy and security

FIND OUT how we protect your personal information, privacy and security.