

PENSIONER'S LIFE CERTIFICATE

Name in Full:

Address in Full:

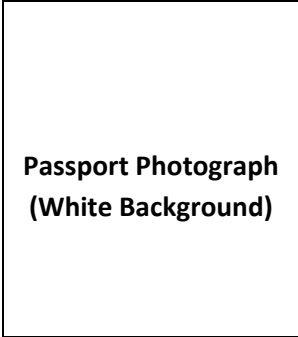
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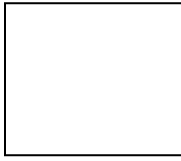
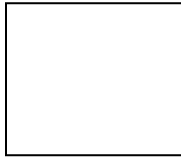
Last Employer/Address:

.....

Date of Retirement:

Telephone: Mobile/Home:



Signature: Thumbprint   Date

Left

Right

Next of Kin Details:

Name

Contact Address:

GSM/Phone Number: Relationship:

Next of Kin Details:

Name

Contact Address:

GSM/Phone Number: Relationship:

ANY CHANGE TO THE ABOVE INFORMATION MUST BE COMMUNICATED WITHIN SIX MONTHS.

ATTESTATION

I certify that Mr. /Mrs.:

Whose Picture is shown above, is alive and appeared before me today

Name in Full.....

Rank or Status:

Signature & Date (And Official Stamp).....

NOTE: The attestation required above must be given by CRIB Pension Fund Managers Limited's, Manager or representative. All pensioners are expected to appear.