Form 19 (b)

REPUBLIC OF NAMIBIA SOCIAL SECURITY COMMISSION SOCIAL SECURITY ACT, 1994

The Chief Executive Officer Social Security Commission Private Bag 13223 Windhoek Namibia

IN AI	LL CORI	RESPO	NDENC	E QUOTE

INDEMNITY CLAUSE TO BE SIGNED BY RETIREMENT BENEFICIARIES FOR THE DEATH BENEFIT IN TERMS OF SECTION 31 OF THE SOCIAL SECURITY ACT, (ACT 34 OF 1994)

I hereb	by confirm that I					
(Name	& surname), ID/Passport No	, am an aged person in				
terms o	of the Nation Pensions Act, 10 of 1999	2. I declare that I understand the provisions of Section 31 of the				
Social	Social Security Act, 34 of 1994 in respect of my retirement benefit claim, which I lodged with the Social					
Securit	ty Commission on the/	/				
The ar	mount of N\$3000.00 represents the o	nly and final settlement for this benefit and neither I, nor my				
depend	dents, are not now or in the future entit	led to the said benefit.				
Signed	l at on this	day of200				
•••••	CLAIMANT	DATE				
WITN	IESSES:					
1.	•••••					
	NAME & SURNAME	SIGNATURE				
2.						
	NAME & SURNAME	SIGNATURE				