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 ALL CORRESPONDENCE 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	y confirm that I	
(Name	& surname), ID/Passport No	, am an aged person in
terms o	of the Nation Pensions Act, 10 of 1992	. I declare that I understand the provisions of Section 31 of the
Social	Security Act, 34 of 1994 in respect of	f my retirement benefit claim, which I lodged with the Social
Securit	ty Commission on the/	/
The an	mount of N\$3000.00 represents the on	ly and final settlement for this benefit and neither I, nor my
depend	lents, are not now or in the future entitle	ed to the said benefit.
Signed	at on this	day of200
•••••	CLAIMANT	DATE
WITN	ESSES:	
1.		
	NAME & SURNAME	SIGNATURE
2.		
	NAME & SURNAME	SIGNATURE