

**COMMUNICATIONS AND ALLIED INDUSTRIES PENSION FUND**

**DEATH OF A PENSIONER**

NAME OF PENSIONER:

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PENSION NUMBER:

.....

ACTION BY PAYMENT SECTION

SIGNED

DATE

PENSION PAYMENTS CEASED: .....

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PENSION ADVICE SLIP CEASED:.....

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SUSPENDED:

ACTION BY PENSIONS SECTION

SIGNED

DATE

REMOVED FROM PENSION ADMIN:

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LETTER AKNOWLEDGED:

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