

COMMUNICATIONS & ALLIED INDUSTRIES PENSION FUND

The Chief Executive Officer
CAI Pension Fund
P.O Box CY1067
Causeway
HARARE

Dear Sir/Madam

METHOD OF PAYMENT OF PENSION- REFUNDS.

I acknowledge and understand that:-

- a) No payments will be made to a third party's account.
- b) Attach certified copy of your ID.
- c) Attach current Bank Statement.

FULL NAME _____

DATE OF BIRTH _____ NATIONAL ID NO _____

E.C _____ SBU _____ EXIT _____ JOB TITLE _____

I wish my refund of pension contributions to be paid to me as follows:-

- 1. Into my Bank/Building Society:-
 - Account Number
 - Type of Account:
 - Name of Bank:
 - Bank Code: Branch.....
- 2. Postal Address:
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- Email Address:
- Phone Numbers:

DATE

SIGNATURE