

SAMRO Retirement Annuity Fund

Fund registration number 12/8/7425/2

ADDITIONAL VOLUNTARY CONTRIBUTION FORM

- Please assist us by completing all sections in full using CAPITAL letters.
- Indicate all options selected by means of a cross [X].
- Ensure that all information provided is accurate.
- Should you require any assistance with this application please contact Robson Savage (Pty) Ltd on 011 643 4520 or Seshego Benefit Consulting on 011 802 8011.

Section 1: MEMBER DETAILS

Title: Surname:

First Name(s):

RSA ID Number: Date of Birth:

If no RSA ID Number, Passport Number:

Country of Issue:

Income Tax Number:

Residential Address

Unit Number: Complex Name:

Street Number: Street Name:

Suburb: Town:

Country: Postal Code:

Postal Address

Postal Code:

Contact Details

Telephone Numbers: or

E-mail Address:

Section 2: SOURCE OF FUNDS

I wish to make an additional voluntary contribution to the value of R . ,
and confirm that the source of this contribution is (E.g. Salary, savings, royalties)

Section 3: MEMBER DECLARATION

I understand and/or confirm that:

- The information given on this form is true and correct.
- I may make one additional voluntary contribution to the fund per annum.
- An administration fee of R450 (inclusive of VAT) will be deducted from my contribution on receipt by the fund.
- My contribution will be invested in the fund portfolio as chosen by the trustees of the fund.
- My contribution will be invested no later than the 1st working day of the month following the receipt of my contribution in the fund's bank account.
- The onus is on me to submit this form together with proof of payment to the fund administrators and to confirm receipt by the fund administrators.

Signature of Member

Date

Section 4: SAMRO RETIREMENT ANNUITY FUND BANKING DETAILS

All deposits relating to lump sum or monthly contributions to the fund must be made into the following bank account:

Account name:	SAMRO Retirement Annuity Fund
Bank:	FNB
Branch:	RMB Corporate Banking
Branch:	255005
Account number:	62710206097

Please use your 13 digit SA ID number (or Passport number if you are a foreign national) as a payment reference for all payments to this bank account and e-mail proof of payment to nataliea@robsav.com or fax to 086 720 6610.

Section 5: DOCUMENTS TO BE SUBMITTED

Please submit the following documents to the fund administrator:

E-mail to nataliea@robsav.com

or fax to 086 720 6610

- Fully completed and signed Additional Voluntary Contribution Form
- Copy of ID
- Proof of payment

Notes

- Your application will be processed once all the fully completed forms and required documents have been received by the fund and your contribution payment is reflecting in the fund's bank account.
- You will receive confirmation once your application has been processed.
- This contribution will be included on your Income Tax Certificate as issued by the fund each tax year.