



AXIS PENSION TRUST

AXIS PENSION PLAN CHANGE OF MANDATE FORM

NAME:

PERSONAL DETAILS:

TICK AS
APPLICABLE:

- NAME CONTRIBUTION PROPORTIONS BANK DETAILS
 CONTACT MARITAL STATUS SIGNATURE

CHANGE FROM:

CHANGE TO:

.....
.....
.....
.....

BENEFICIARY DETAILS :

TICK AS
APPLICABLE:

- NAME PERCENTAGE
 CONTACT

CHANGE FROM:

CHANGE TO:

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.....

DECLARATION

I declare that the information provided above is true and should be binding on me.
I therefore give Axis Pension Trust the right to effect these changes to my records with them.

..... ACCOUNT HOLDER'S SIGNATURE	DD / MM / YYYY DATE	OFFICE USE ONLY : NAME : SIGNATURE : DATE:
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