



KELLY GROUP FLEXIBLE PROVIDENT FUND

Provident Fund Form D

FOR INTERNAL USE:			
Co. Code	<input type="text"/>	Branch Code	<input type="text"/>
Assignee no.	<input type="text"/>	Consultant	<input type="text"/>
Branch Manager Signature	<input type="text"/>		

To be completed by the **employer** of a member of a provident fund, in each instance where the lump sum payment arising from the Fund, in consequence of the death or retirement of a member, exceeds or is likely to exceed:

Fund Details

Full Fund Name:	<input type="text" value="Kelly Group Flexible Provident Fund"/>
Scheme/Policy Number	<input type="text"/>

Employer Details

Name of Employer	<input type="text"/>
Employer's Postal Address	<input type="text"/>

Member Details

Member's Surname	<input type="text"/>
Member's First Names	<input type="text"/>

Member's Taxation Details

Income Tax Number	<input type="text"/>
Revenue Office	<input type="text"/>

Highest average salary **actually** earned by the member during any five consecutive years in service of the employer, during his/her membership of the Fund.

- Notes:**
- a) Salary is that which is declared for Income Tax purposes, and need not agree with that used for provident fund purposes.
 - b) The five-year term relates to any consecutive 60-month period whilst the taxpayer was in service of the Employer and not a member of the Fund.

	For the Period		Annual Salary
From	<input type="text"/>	R	<input type="text"/>
From	<input type="text"/>	R	<input type="text"/>
From	<input type="text"/>	R	<input type="text"/>
From	<input type="text"/>	R	<input type="text"/>
		Total R	<input type="text"/>

Average for the 5 year period for which the member was employed:
Details of any lump sum earnings from any other Fund:

<input type="text"/>
<input type="text"/>

If the member has, during his/her membership, been employed in any territory outside South Africa, give details, including periods of service:

<input type="text"/>

To be completed on Death of Member only

Twice the member's salary for the 12 month period ending at death: Certified correct to the best of my knowledge and belief.	R	<input type="text"/>
Authorised Signatory of Employer	<input type="text"/>	Date <input type="text"/>