



Beneficiary determined individually for flexible pension plan (Pillar 3b)

Policy no.

Policyholder

First name and last name

Date of birth

Street address

Postcode and town

Can be reached for questions at telephone number

Beneficiary

Please provide information about the beneficiaries at maturity and in the event of death. First name, last name, date of birth, and information about the beneficiaries relationship to the policyholder are mandatory; address and place of origin are voluntary.

Beneficiary at maturity:

Beneficiary in the event of death:

<p>Place and date</p> <p>_____</p>	<p>Signature of the policyholder</p> <p>_____</p>	<p>For minors or persons under legal guardianship: Authorization by the legal guardian</p> <p>_____</p>
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