

DECLARATION

I, _____, do solemnly declare that the above particulars are entirely correct in every respect and I undertake to advise Pensions Administration of any changes immediately.

Signature of member/ pensioner

Declared and signed before me this [] day of [] year of []

Thumb print only needed for cases where the member or pensioner cannot read / write

Signature of Commissioner of Oaths

Official Stamp of the Commissioner of Oaths

Thumb print member/pensioner

Designation []

Postal address [] CODE

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