

TLHOMAMISOYA BAIKAEGI/BAJABOSWA

Tswee-tswee bala kitsiso e e latelang ka kelotlhoko pele o ka tlatsa fomo

Iswee-tswee kwala ka ditlhaka tse ditona ka pene e ntsho kgotsa e tala.

(E tshwanetse go tlatswa ke YO ESENG WA LOSIKA)

Debswana Pension Fund I he Operations Manager TSWEE-TSWEE BUSETSA FOMO E E TLADITSWENG KWA:

PLEASE RETURN THE COMPLETED FORM TO:

INPUT OF THE FAMILY AND RELATIVES OF THE DECEASED

PLEASE ENSURE THAT THE INFORMATION DISCLOSED WITHIN IS PURELY AS YOU KNEW IT DURING YOUR AQUAINTANCE/RELATIONS WITH THE DECEASED AND MUST REMAIN INDEPENDENT OF THE OPINION OR

appreciated.

To assist the Board of Trustees in fairly distributing the member's funds, we have identified you as a potential resource to provide us with additional information. In the sections below we provide you with a set of questions for you to answer. We request that the questions be answered as fully as possible. The Board of Trustees will review all the information received.

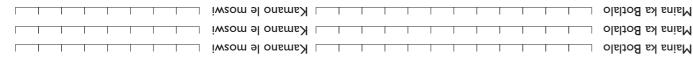
of the deceased as prescribed by the rules of the Fund.

The Debswana Pension Fund provides for retirement benefits to members of the Fund. In the event of a member's demise, the retirement benefits that are due to the member are distributed by the board of Trustees to dependents and beneficiaries

Please print in block letters using black or blue ink. Please read the following information carefully before completing the form







slegoM L

Tel: 267 361 4354

Tel: 267 361 4267

Ke tlhomamisa gore ga ke itse ka bana bape fela ba moswi a ka tswang a ne a na le bone kwa ntle ga ba ba kwadil-

Tel: 267 361 4236

Eax: 267 3936239

Gaborone Office

Ga o patielediwe go tlatsa fomo e, e bile go tsaya karolo ga gago mo thulaganyong e ke boitihaopo. Mme fela re ka lebogela

Mo dikarolong tse di latelang, re tla kopa o arabe dipotso. Ke kopa gore dipotso di arabiwe ka botlalo. Lekgotla la Batlhoko-

Go thusa Lekgotla la Batlhokomedi go kgaoganya madi a moswi, o thophilwe o le mongwe wa ba ba ka re okeletsang kitso.

ditshiamelo tsa leloko di kgaogangwa ka baikaegi le bajaboswa ke lekgotla la Batlhokomedi jaaka go kaiwa ke melawana ya Letlole la Phensene la Debswana le neela maloko a Letlole ditshiamelo tsa go tlogela tiro ka bogodi. Fa leloko le tlhokafala,

ITSAUE/DIRISAUA LE MOSWI MME SE TSHWANETSE GO IKEMELA KA NOSI, SE SA TLATSWE KE KANA KA

TSWEE-TSWEE RURIFATSA GORE SE O SE KWALANG KE SE O NENG O SE ITSE KA NAKO YA FA O

Fa o eletsa go thusiwa go tlatsa fomo, tswee-tswee ikgolaganye le rona mo dinomoreng tse di kwadilweng fa godimo.

'ซรีซพรีนเp

weng ta tlase.

Mogala wa Letheka (Cellphone)

Palo ya dingwaga tse ke itsileng moswi:

(J.K tsala, ngaka, modiri ka ene, moruti – ESENG WA LOSIKA),

Ke thomamisa ka go ikana gore: Nna (leina ka botlalo) 🛛

MEGOPOLO YA BA LELWAPA KGOTSA MASIKA A MOSWI

medi le tla lebelela dikgang tsotlhe ka leitlho le le tseneletseng.

B. TLHOMAMISO KA MONGWE O SELEYO O IKEMETSENG KA NOSI

Khouti ya mogala 💷

Kamano Yame le Moswi ke

reius (ma) 📖

Gaborone

P/Bag 00512

.ogeg ey osunt

.elolte.

Nomore ya Sesupo sa Omang 🗆

Leina la Mohiri wa Gagwe 📖

A. MAINA A MOSWI A O A ITSENG

You are not obliged to complete the form and your participation in this process is voluntary, however your input will be

The Operations Manager Debswana Pension Fund P/Bag 00512 Gaborone If you need assistance with the completion of the form,	Gaborone Office Fax: 267 3936239 Tel: 267 361 4236 please contact us at the cont	Tel: 267 361 4267 Tel: 267 361 4354 tact details provided above.											
A. DETAILS OF THE DECEASED AS YOU KNOW	THEM												
Name of known employer		I			1								
First name(s)													
B. DECLARATION BY INDEPENDENT THIRD PA	ARTY												
I declare under oath that: I (full name and surname)		1											
Identity number													
Relationship to the deceased (e.g. friend, doctor, co	lleague, pastor - NOT A FA	MIL	í mem	IBER)), ∟		I						
Number of years that I have known the deceased:	years,												
My landline telephone	Code N	lo.											
My cellphone number		1					1						

Declare that I am not aware of any biological children whom the deceased may have had, nor am I aware of any financial dependents the deceased may have had other than those listed below.

Full name	Relationship to the deceased
Full name 💷 👘 👘 👘 👘 👘	Relationship to the deceased
Full name	Relationship to the deceased
Full name	Relationship to the deceased
Full name	Relationship to the deceased
Full name	Relationship to the deceased
Full name	Relationship to the deceased
Full name	Relationship to the deceased
Full name 💷 💷 💷 💷 💷	Relationship to the deceased
Full name	Relationship to the deceased

If there is any additional information that you know that can be used by the Trustees with regards to the deceased life e.g. life partners, financial dependents, maintenance orders, etc please narrate it below;

Full name and surname of Independent Third Party deponent (the same person mentioned under section B)

Signature of deponent

I certify that the deponent acknowledges that he/she knows and understands the content of this affidavit, that he/she has no objection to taking the oath and that he/she considers the oath to be binding on his/her conscience.

Sworn and signed before me at ______ this ____ day of ____ 20 _____

Commissioner of Oaths/Tribal Authority/Police Officer (Delete which is not applicable)

Full name ____

Official title _____ Signature _____

OFFICIAL STAMP	

rek ibəwga____ib ra ____ _02_

go ikana mme e bile o itse fa maikano a gagwe a mo tlama Ke ikana gore mothomamise o dumela gore o itse le go thaloganya diteng tsa mokwalo o o ikanetsweng owa gore ga a gane

ολυτηρο

Maina a motho yo o ikemetseng ka nosi yo o thomamisang (motho yo o kwadilweng mo karolong ya B)

nankolole fa tlase;; gagwe, ba ba neng ba ikaegile ka thuso ya gagwe ya madi, ditlaelo tsa lekgotla tsa tlhokomelo ya bna, jalo jalo, tswee-tswee di Ga gona le sengwe se o eletsang go se bua se se ka thusang Batsamaise mabapi le botshelo jwa moswi jaaka baratani ba

Ι	1	1	1	I			iwsom 91 onsmsY		Ι	1			1				Maina ka Botlalo
		Ι	Ι	1			iwsom			1		Ι			Т	Τ	Maina ka Botlalo
							iwsom			1							Maina ka Botlalo
							iwzom sl onsmsY	[1								Maina ka Botlalo
							iwzom sl onsmsY	[1							Maina ka Botlalo
							iwsom əl onsmsY	[1							Maina ka Botlalo
							iwsom əl onsmsY										Maina ka Botlalo
							iwsom əl onsmsY										Maina ka Botlalo
							iwsom əl onsmsY										Maina ka Botlalo
				1			iwsom el onsmaX										Maina ka Botlalo
		-			_		iwsom el onsmaX										Maina ka Botlalo
							iwsom el onsmaX									-	Maina ka Botlalo
		1		1			iwsom el onsmañ										Maina ka Botlalo

Setlanyo sa mothomamise

Go ikanwa le go tlanya mo go nna kwa_

Moikanisi/Kgosi/Lepodisi(Sutha mo eseng gone)

Maina

OmasM