



Please type or print the information in BLOCK LETTERS when filling in this form. All pages must be dated and hand-signed.

PAYMENT INSTRUCTIONS FOR A RESIDUAL SETTLEMENT AND ANY RETROACTIVE BENEFIT DUE

under article 38 of the UNJSPF Regulations and Section J.3 of the Administrative Rules

Section 1:

Deceased participant or retiree information

Unique Identification number (UID) (required)

Pension number (optional)

Last name/surname

First name

Middle name

Section 2:

Designated recipient information

Recipient's full name

Date of birth (DD/MM/YYYY)

Sex

or Name of institution (if applicable)

Identification number or registration number (if an institution)

Number and street of the mailing address

City

State or province

ZIP or postal code

Country

+
Country code Area code Phone number

Email

Section 3:

Bank account information

1. Payee name (please provide your full name exactly as it appears on your bank statement)

2. Name of bank or financial institution

3. Beneficiary account number and/or IBAN

4. Bank ID code (SWIFT code, ACH routing number, sort code, transit number, IFSC, BSB number, NCC, etc.)

5. Currency of payment (unless otherwise indicated, the payment of your benefit will be in United States dollars)

Checking

Savings

6. Name of branch (if applicable)

7. Account type

8. Bank address: street address of bank or financial institution

City

ZIP or postal code

State or province

Country

Signature (please sign within the lines of the box)

Date (DD/MM/YYYY)

Section 3:

(continued)

9. Intermediary or correspondent bank (if applicable)

SWIFT code of intermediary or correspondent bank

City of intermediary or correspondent bank

Country of intermediary or correspondent bank

10. Additional bank account information (if applicable)

If your account is held at a financial institution, such as a **brokerage firm (individual retirement account), UNESCO USLS, AMFIE/AMFI or UNSSCA**, please specify:

Name of the financial institution

Bank ID code

Beneficiary account number with the financial institution

11. Other information (if applicable)

Section 4:

Acknowledgement and signature

I HEREBY ACKNOWLEDGE AND CONFIRM THAT:

- I have read [article 38 of the UNJSPF Regulations](#) and sections B.5 and J.3 of the Administrative Rules.
- I have read the [instructions for form PENS.E/2-C \(04.2025\)](#).
- I have enclosed a copy of a valid Government-issued photo ID showing my full name, date of birth and scripted signature.
- I have enclosed a recently dated bank statement and/or bank document showing all my banking information or a voided cheque and all the required documents, as listed in the [instructions for form PENS.E/2-C \(04.2025\)](#).

Signature (please sign within the lines of the box)

Date (DD/MM/YYYY)

Section 5:

Signature authentication

I, THE UNDERSIGNED, CERTIFY THAT THE PERSON IDENTIFIED IN SECTION 2 ABOVE SIGNED THIS FORM IN MY PRESENCE.

Printed full name of the United Nations official OR government official OR notary public

Email

Official title and licence OR index number (if applicable)

Signature

Date (DD/MM/YYYY)

Affix official stamp/seal of office here