



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)

