



**NOMINATION FORM**

Name of Member		NRIC No.
Address		Date of Birth
Postal Code	Contact No. (O) _____ (H) _____ (HP) _____	Union Branch

I hereby nominate the person(s) named in the Schedule as my nominees to receive at my death the shares set down against their respective names of all sums payable under the AUSBE Welfare Schemes and /or NTUC GIFT provided that the share of any nominee who dies before me shall pass to the surviving nominees and shall be shared amongst them in the same proportion as the respective shares of the surviving nominees bear to each other

**Schedule Of Person/s Nominated**

No.	Nominee/s	NRIC / BC No.	Date of Birth dd/mm/yyyy	Relationship to Member	Share Percent (%)
1	Name as shown in NRIC/BC (IN BLOCK LETTERS)				
	Address				
2	Name as shown in NRIC/BC (IN BLOCK LETTERS)				
	Address				
3	Name as shown in NRIC/BC (IN BLOCK LETTERS)				
	Address				
4	Name as shown in NRIC/BC (IN BLOCK LETTERS)				
	Address				

\*( In the event that my nominee/s has/have not attained the age of 21 years upon my death, I hereby appoint Mr /Mrs /Miss /Mdm \_\_\_\_\_ I/C No. \_\_\_\_\_ Address. \_\_\_\_\_ as a guardian and trustee to receive the share/s on behalf of the named nominee/s. ).

\*delete if inapplicable

\_\_\_\_\_  
**Signature of Member**

Dated and signed in Singapore this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

**Important:** The two witnesses below must be 21 years old and above and must not be the member or nominee(s). The two witnesses must sign and provide particulars as requested.

	Witness No.(1)	Witness No.(2)
Signature of Witnesses		
Full Name		
I/C No		
Tel No		
Address		

Note: The completed nomination form to be submitted to AUSBE at No.2 Hampshire Road, Union Office, Singapore 219428