

## NATIONAL TREASURY Republic of South Africa

## **Government Employees Pension Fund**

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## **Choice Form for State Subsidised Medical Contribution**

This form enables the GEPF to process the application for the State to continue to subsidise the Medical Aid Contribution of the member / spouse. The member (or spouse in case of death in service) must complete this form that must be signed by the employer department. The completed form with the Z102 form must be submitted by the

that must be signed by the employer department. The completed form with the Z102 form must be submitted by the employer department to the GEPF.																																		
A) PERSONAL PARTICULARS OF MEMBER (Compulsory)																																		
	Member No.									<b>2.</b> Sala															3. Title									
4.	Surna	me																																
5.	Firstna	ame																																
6.	Middle	e nai	mes																															
7.	ID No																<b>8.</b> P		(or) sport	No.														
9. Member's age at withdrawal: 10. Reason for withdrawal:												Norn	nal I	Reti	reme	ent		Death III Health			Injury on Duty Severance Package													
	B) CHOICE FOR MEDICAL BENEFIT UPON RETIREMENT / DEATH (Compulsory, select only one option)  Note: Broken service periods can be added to the actual period of service (when proof is provided) but non- service periods bought cannot be added.																																	
0	OPTION A: Continued State Subsidised Membership																																	
	<ul> <li>Members older than 50 years with 15 years of actual government service qualifies for continued membership only (4/6 of contribution to be state subsidised).</li> <li>Members younger than 50 years with 15 years of actual government service qualify for continued membership only, as from the age of 50 (4/6 of contribution to be state subsidised).</li> <li>No qualifying requirements are necessary for a member that retire due to injury on duty and qualifies for continued state subsidised membership only.</li> </ul>																																	
	<ul> <li>PSCBC Resolution 7 of 2002 - Severance Package: Members withdrawing on/after 17 June 2002 that are older than 55 years with 15 years of service qualify for continued state subsidised membership only.</li> </ul>																																	
0	<ul> <li>•The spouse of a member that died in service must wait until the age of 50 for continued medical membership, if the member qualified for continued state subsidised membership.</li> <li>• Only 10 years of actual service is needed for a member that retire due to ill health to qualify for continued state subsidised membership.</li> <li>OPTION B: Gratuity Payment (Once-off cash amount)</li> </ul>																																	
	• Members with more than 10 but less that 15 years of actual government service qualify for a gratuity only = (36 x state contribution).																																	
	<ul> <li>Members with less that 10 years of actual government service qualifies for a gratuity only = (12 x state contribution).</li> <li>C) ACTUAL SERVICE PERIODS (Compulsory)</li> </ul>																																	
O,	GOVERNMENT DEPARTMENT: SERVICE PERIOD: From																То																	
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D)	D) DECLARATION BY MEMBER / SPOUSE AND EMPLOYER (Compulsory)																		Employer Code  Date of Service Termination (Exit Date)															
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the undersigned declare that I understand the options offered and												the undersigned declare on behalf of the Employer that I have provided the member												Effective Date										
that I agree that the choice made by me is <u>irrevocable</u> .												/ spouse with explanatory guidelines with																			D			
	e 15 <u>11</u>		Mem	nbe	r's / e / T							regards to the withdrawal options.  Employer's Signature											Official Employer Stamp											
Tel No.										Tel No.												Page 1 of 1 May 2005												