

SECURITY QUESTIONS FORM – FUNERAL BENEFIT PAYMENT

THIS FORM IS NOT TO BE SENT TO THE CLAIMANT. IT MUST BE USED BY THE PSPF OFFICER INTERVIEWING THE CLAIMANT TO ASCERTAIN IF THE CLAIMANT IS AUTHENTIC.

MEMBER/PENSION #: _____

- What was the last position held by deceased at time of retirement or death?

 Response
 Satisfactory
 Not Satisfactory
- 2. Who is the deceased's spouse or last spouse?

Response	Satisfactory	Not Satisfactory

3. What is the Cell number of the person who registered the deceased's death certificate?

Response	Satisfactory	Not Satisfactory

4. Does the person who registered the death certificate know the claimant?

Response	Satisfactory	Not Satisfactory

5. What is the member/pensioner's life status on online.gov.sz?

Response	Deceased	Alive

6. Conclusion of PSPF officer.

Satisfactory	Not Satisfactory	Signature

Comment (if any)