



ADMINISTRATION MANUAL

FOR

**MUNICIPAL COUNCILLORS PENSION
FUND**

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FUND DETAILS

Name of Fund	Municipal Councillors Pension Fund
Registration Number at the FSB	12/8/21600
Registration Number at SARS	18/20/4/2019
PAYE Number	7310715786
Official Address of the Fund / Physical Address	Willows Office Park 276 George Road Erand Gardens, Midrand Johannesburg
Postal Address of Fund	PO Box 7972 Johannesburg 2000

CONTACT DETAILS OF PRINCIPAL OFFICER

Name of Acting/ Principal Officer	Mr. Elias Msiza
Physical Address	Willows Office Park 276 George Road Erand Gardens, Midrand Johannesburg
Postal Address	PO Box 7972 Johannesburg 2000
Telephone Number / Switch Board	0861112014
Facsimile Number	
Email Address	elias@mcpf.co.za
Mobile Number	

Name of Administrator	MCPF FUND OFFICE		
Physical Address	Willows Office Park 276 George Road Erand Gardens, Midrand Johannesburg		
Postal Address	PO Box 7972 Johannesburg 2000		
Telephone Number / Switch Board			
Facsimile Number			
Contact persons			
Busisiwe Kunene	Administration	Tel: 0861 111 2014	/busi@mcpf.co.za

AUTHORISED SIGNATORIES

For compliance purposes, Municipal Councillors Pension Fund Administration Office will only act on documents / instructions from Municipalities if it was signed by an authorised employee.

Municipal Councillors Pension Fund Administration Office therefore requires a letter on the Municipality or Fund's letterhead, indicating the authorised personnel, together with specimen signatories of the relevant staff.

MONTHLY PROCESSES - SUMMARY

The following should be done at month end:

1. The member (13.75%) and Municipality (15%) contributions should be paid into the Fund's bank account before the 7th day of the following month. Use the pay point code as reference on the deposit slip.
2. Pensionable salary is defined by regular earnings and allowances.
3. A payment summary (**Summary of Monthly Contributions**) should be provided confirming that the payment was made and the membership data ties up.
4. A schedule with the details of all the members should be e-mailed through to the administrator. Also include, where applicable, a summary of the exits.
5. A new entrant form for all new members should be included.
6. A schedule of all changes in the member's personal details should be completed.
7. For all exits, an exit form should be completed.

The first five items should be completed by the 7th day of the following month. We will work on faxed documents, however the payment of benefits will not be finalised until we've received the original documentation.

The next couple of sections provide more detail.

MONTHLY PROCESSES - PAYMENT OF CONTRIBUTIONS

The following should be done at month end:

- a) The total contributions deducted from members' salaries or wages plus the amounts contributed by the Municipality in respect of the Fund and the insured benefits must be deposited in the bank account of the Fund before the 7th day of the following month. Please use as reference the pay point code, month and year e.g. PP136 01/2011.
- b) Please note that in terms of the Pension Fund Act, contributions should be paid no later than 7 days after the end of the month for which such a contribution is payable. In terms of the Pension Fund Amendment Act of 1997 which came into effect during 2001, interest is payable on late contributions to retirement funds with effect from 2 November 2001. Late contributions accrue interest at the maximum rate permitted by the Usury Act.
- c) At the end of every month, the total amounts deducted from members' salaries plus the amount contributed by the Municipality must balance to the totals as indicated on the electronic schedule.
- d) The Municipal Councillors Pension Fund Administration Office shall update the monthly salaries and contributions as soon as the payment and the schedules are reconciled.
- e) The Municipal Councillors Pension Fund Administration Office shall invest the contributions and update the values once the new monthly Index has been received. (The Index is received from the Actuary of the Fund and this is received by the 20th of the month).

The Municipal Councillors Pension Fund Administration Office shall then place the information on the Internet via the e-Com_Pen system.

DATA EXCHANGE

The Municipal Councillors Pension Fund Administration Office (MCPF Administration Office) needs membership details of all the members of the Fund on a monthly basis.

The Municipality must provide the MCPF Administration Office with an electronic file (this can be in the form of an excel spreadsheet or a flat file). This must be e-mailed to the MCPF Administration Office. The MCPF Administration Office will require the fields as indicated in the file layout. In addition, the Municipality should also complete the following:

- **Schedule of exits,**
- **Schedule of new members**
- **Schedule of any change of basic information.**

**SCHEDULE OF CONTRIBUTIONS TEMPLATE
(COMPEN COMPLIANT)**

an instance.

The Trustees of the Fund has a duty in terms of Section 37C of the Pension Funds Act to ensure that the lump sum death benefits arising from the death of a member are paid to the member's dependents and/or beneficiaries, as defined in the Act, in such portions as is deemed equitable.

To ensure that the payment of the lump sum benefits take account of the member's wishes, it is obligatory for each member to complete a **Beneficiary Nomination Form**. This form should be updated whenever the member's circumstances change to ensure that the correct dependents and beneficiaries are reflected on the member's record.

Careful thought should be given to the completion of the **Beneficiary Nomination Form** to ensure that all persons whom the member may wish to benefit, after consideration by the Trustees, are clearly stated.

The completed form must be kept in the member's personnel file and only forwarded to Municipal Councillors Pension Fund Administration Office if the member should pass away.

New Members Admission Subscription Form

Every new member shall complete the New Member Admission Subscription Form. The purpose of the form is to ensure that the member duly confirms his or her awareness and understand the following fund processes:

- 1) Rules of the fund
- 2) The benefits of the fund
- 3) Non-payment of contributions
- 4) Dealing with non-payments contributions and the impact on Group Life Assurance benefits
- 5) The investment objectives
- 6) The returns on investments
- 7) Contacting the fund

It is the responsibility of the fund to ensure the availability of the contract to the municipal offices for completion by members. Municipality officials shall assist every new joining member with the completion of the New Member Admission Subscription Form in the absence of a Municipal Councillors Pension Fund representative on site.

All relevant information, as required, must be attached to the New Member Admission Subscription Form and other relevant documents and posted to the Fund offices, or e-mailed to info@mcpf.co.za

Procedure to be followed in respect of new members

a) **Municipal Human Resources Department or Councillor Support Unit**

- (i) Provide the new member with a copy of the Members' Guide and the rules of the fund
- (ii) Assist the new member to complete the **New Member Admission Subscription Form**
- (iii) Assist the member with explaining **New Member Admission Subscription Form**
- (iv) Assist the new member to complete the Nomination of Beneficiary Form
- (v) Forward the new member documents to MCPF Administration Office via email to info@mcpf.co.za. The following documents must be attached to the **New Member Admission Subscription Form**:
 - **Copy of Nomination of Beneficiary Form**
 - **Copy of identity documents/birth certificates of beneficiaries and members**
 - **A covering letter/memo from the Employer (in an Employer's letterhead)**

Applications to be forwarded to info@mcpf.co.za

b) **Municipal Councillors Pension Fund Administration Office will**

- i) Check that the applicant councillor meets the eligibility requirements and register the applicant councillor as a member of the Fund; and
- ii) Forward a Membership Certificate and a **Beneficiary Nomination Form** to the Municipality for onward transmission to the member.

c) **Municipality should**

- (i) Explain to the member the significance of the **Beneficiary Nomination Form**.
- (ii) The completed **Beneficiary Nomination Form** must be retained by the Human Resources Department and filed in the member's personnel file.

WITHDRAWAL FROM SERVICE

RESIGNATION, DISMISSAL OR RETRENCHMENT

The options available when a member elects to leave the Fund other than for retirement, are as follows:

1. Cash Withdrawal Benefit

The member may take his benefit in cash.

SARS tax implications applies when member draws his accrued benefit

2. Transfers to Other Funds

The member may transfer his benefit to an approved retirement annuity, an approved provident fund or an approved preservation provident fund. A member can elect to take up to 1/3rd in cash (subject to tax), and the balance to be transferred to other fund of choice, (with no tax implication).

Procedure to be followed:

a) Municipality

The company must complete and submit the original claim form to Municipal Councillors Pension Fund Administration Office.

The form must be completed and signed by the member as well as signed and stamped by the Municipality with the official company stamp. The form may be faxed to Municipal Councillors Pension Fund Administration Office but payment can only be finalised on receipt of the original form.

If there is an alteration on the form, each alteration must be signed in full by the Municipality and member in the margin next to the alteration.

A copy of the member's bank statement / cancelled cheque or proof of banking details must be attached to the claim form.

In order to facilitate quick processing, the claim form should be submitted as soon as possible after the employee submits his notice of withdrawal.

b) Municipal Councillors Pension Fund Administration Office

On receipt of the **Withdrawal Claim Form**, Municipal Councillors Pension Fund Administration Office will

- (i) Calculate the benefit due to the member in terms of the Rules of the Fund.
- (ii) Apply for a tax directive from the South African Revenue Services.
- (iii) Pay the benefit as instructed by the member and the Municipality.

- (iv) Send a letter to the member, advising the member of the payment into his/her banking account or to another approved fund. An IRP5, if applicable, will accompany the payment letter. Please note that benefit payments shall be paid directly into the member's bank account.

NOTES

- (i) Municipality (Employer may make claim to a member's cash benefit only under certain circumstances. See **Prior Claim by Municipality** for details.

WITHDRAWAL CLAIM FORM

EXPLANATION OF THE CLAIM FORM.

The form must be completed, signed and stamped whenever a member withdraws from the Fund.

Name of Fund	Insert: Municipal Councillors Pension Fund plus pay point
Fund Code	Insert the fund code as allocated
Surname and full names	Self-explanatory

Declaration by Member and Municipality must be signed, dated and bears the company's official stamp.

SECTION 1 – Member's Personal Details

Date of Birth	Insert member's date of birth.
Identity Number	Insert member's identity number.
Tax Number and Tax Office	Insert the member's tax number.
Postal Address	Please insert the member's postal address and postal code.
Residential Address	Please insert the member's residential address and postal code. This is needed for the Receiver of Revenue.
Contact Telephone Number	Please provide a telephone number where the member can be contacted

during office hours. It is useful in the event of queries.

SECTION 2 Fund Details

Date of Withdrawal	Please insert the date of withdrawal (must be the last day of the month even if the member left in the middle of the month but has contributed for that month).
Date of last contribution	Contributions for the Fund are updated monthly. Please indicate the final month in which the member will contribute.
Type of Exit	Please place an X next to the appropriate type of exit. If "other" please indicate i.e. Retirement/Death
Housing	Indicate yes or no
Loan	Circle yes or no – if yes a copy of the divorce order must be attached to the form
Divorce	
Final Contributions	Please indicate the final month's employee and Municipality's contribution.
Final Annual Pensionable Salary	Please insert the member's final pensionable salary.

SECTION 3 Withdrawal Options

On withdrawal or retirement from the Fund, a member may elect not to receive his / her benefit in cash, but to transfer it to another pension fund or to a retirement annuity fund or to another preservation vehicle to ensure that adequate provision is made for his / her eventual retirement.

In addition, should the withdrawal benefit be transferred to another approved fund, tax will not be deducted from the withdrawal benefit on transfer.

Withdrawal Options	Please indicate Yes or No for the member's election.
Member's Banking Details	Insert the name of the bank, branch

name, account number, branch code, and type of account.

For security reasons, Municipal Councillors Pension Fund Administration Office shall pay all benefits into a banking account.

Type of Receiving Fund

Please complete this section if the member has decided to transfer all or part of the benefit. Please attach a copy of the proposal form and supply the contact person's name, address and phone number and the SARS approval number.

Banking Details

Paid to another Fund

If all or part of the benefit is paid to another fund, please supply the receiving fund's banking details.

Paid in respect of a Prior Claim

If all or part of the benefit is payable in respect of a prior claim, please supply the banking details.

Paid in respect of a Court Order

If a part of the benefit is payable in respect of a court order, please supply the banking details of the ex-spouse.

NOTES

1. With the **Withdrawal Claim Form** the Municipality is authorising Municipal Councillors Pension Fund Administration Office to terminate the employee's membership of the Fund and pay the withdrawal benefit. It is therefore important that an authorised signatory of the Municipality, who is not the withdrawing member, should sign the claim form. The claim form should also bear the Municipality's official company stamp.
2. The claim form must also be signed by the withdrawing member to
 - a) Verify the benefit payment details; and to
 - b) Confirm that the consequences of any options elected are understood.

Where a member has absconded or cannot be reached in any way to sign the claim form, the reason why the member did not sign the notification must be supplied.

4. In order to ensure that a member's benefit is paid with the least delay, please ensure that the claim form is fully and correctly completed and any supporting documentations attached.

RETIREMENT

Retirement Benefits

An annuity purchased with the member's share of the scheme from the underwriter of choice.

Commutation of Retirement Benefit

Up to 1/3rd portion of the member's retirement benefit can be commuted/converted to cash to which a member can take as a lump sum.

Procedure to be followed

a) Quotations

Municipal Councillors Pension Fund Administration Office shall provide a quote of the member's retirement benefit at normal retirement date. This quote shall be made available 6 months prior to the member's anticipated normal retirement date. This should allow adequate time for the member to consult with various financial advisers or consultants and thus advising the fund of elected options when submitting the retirement documents to the fund.

b) Municipality (Employer)

The Municipality must complete and submit the original Claim Form on behalf of the member. .

The front page must be completed and signed by the member as well as signed and stamped by the Municipality with the official company stamp. The forms together with the additional required documentation can be emailed to Municipal Councillors Pension Fund Administration Office however payment can only be finalised on receipt of the original forms.

A copy of the member's bank statement / cancelled cheque or proof of banking details must be attached to the claim form.

The Municipality and member must initial each page of the **Retirement Claim Form**, however if there is an alteration on any page, the Municipality and member must sign in full in the margin next to each alteration.

c) **MCPF OFFICES**

On receipt of the **Withdrawal Claim Form** and related documents, Municipal Councillors Pension Fund Administration Office will,

- (i) Calculate the benefit due to the member.
- (ii) Apply for a tax directive from the South African Revenue Services.
- (iii) On receipt of the directive, pay the member's retirement benefit.

Send a letter to the member advising the payment details. An IRP5, if applicable, will accompany the payment letter. Please note that we would like all benefit payments to be paid directly into the member's bank account.

NOTES

1. With the **Withdrawal Claim Form**, the Municipality is authorising Municipal Councillors Pension Fund Administration Office to terminate the employee's membership from the Fund and pay the retirement benefit. It is therefore important that an authorised signatory of the Municipality should sign the Declaration on the claim form. The claim form should also bear the Municipality's official company stamp.
2. The **Withdrawal Claim Form** must also be signed by the retiring member to
 - a) Verify the benefit payment details, and
 - b) Confirm that the consequences of any options elected are understood.
 - c) The Municipality and Member must sign the form. However if there is an alteration then, in the margin next to the alteration, we require the full signatures.
3. To ensure the prompt payment of the benefits please ensure that the **Withdrawal Claim Form** is completed correctly and that all the required supporting documentation is certified as true copies and submitted to Municipal Councillors Pension Fund Administration Office.

**DEATH IN SERVICE
PROCEDURE**

a) Municipality

The Municipality, which is the Employer, shall inform Municipal Councillors Pension Fund Administration Office when it becomes aware of the death of a member. Municipal Councillors Pension Fund Administration Office shall then inform the underwriter of the death claim. Should this not happen and the reporting period has expired, the underwriter may repudiate the claim.

When the Municipality has obtained the required information and completed the claim form submit the original claim form together with the additional required documentation to Municipal Councillors Pension Fund Administration Office.. The forms can be e-mailed to the Municipal Councillors Pension Fund Administration Office however payment can only be finalised on receipt of the original forms.

A copy of all the beneficiaries' bank statement / cancelled cheque or proof of banking details must be attached to the claim form.

b) MCPF

On receipt of the claim form and related documents, Municipal Councillors Pension Fund Administration Office will

- (i) Sending the Funeral Claim Form and Death Benefit Claim Form to the Insurer claiming the relevant Benefit.
- (ii) Calculate the lump sum due and forward the documentation to the Trustees of the Fund for consideration and approval of the distribution of the death benefit.
- (iii) Request the payment of the insured death benefit from the underwriter.
- (iv) On receipt of a Trustees resolution setting out to whom the death benefit must be paid, Municipal Councillors Pension Fund Administration Office shall apply for a tax directive from the South African Revenue Services.
- (v) On receipt of the tax directive, Municipal Councillors Pension Fund Administration Office will pay the death benefit, as instructed.

SECTION 2 Marital status of deceased at date of death

Married, Widowed, Single, Divorced Tick the appropriate one that relates to the deceased.
How many spouses survived the deceased Self-explanatory

SECTION 3 Death Details

Date of Death Please insert date of death as per the death certificate.
Cause of Death Please insert cause of death as per death certificate. (Establish the correct cause of death if the death certificate states “natural” or “unnatural”).

SECTION 4 Final Contributions

Final Month in which contributions made Contributions for the Fund are updated monthly. Please indicate the final month in which the member contributed.
Final Contributions Please indicate the final month’s Employee and Municipality’s contribution.
Final Monthly Pensionable Salary Please insert the deceased final pensionable salary.

SECTION 5 Service outside SA

Please indicate the period of service outside South Africa and the county, if applicable.

SECTION 6 Prior Claim

Please indicate Yes or No. If the answer is Yes, then a **Prior Claim Form** should be submitted.

SECTION 7 If Married

a) Spouses’ Full Names Self explanatory
Marriage Civil/Customary/Common Law How was the spouse married?
Address Details Please insert the spouse’s postal details and code.
Telephone Number and Area Code This relates to the spouse and is useful in event of queries.

COMPLETE THIS SECTION IF THE DECEASED HAD MORE THAN ONE SPOUSE

b) Spouses' Full Names Marriage Civil/Customary/Common Law Address Details	Self explanatory How was the spouse married? Please insert the spouse's postal details and code.
Telephone Number and Area Code	This relates to the spouse and is useful in event of queries.

SECTION 8. If Single

Was the deceased living with anyone as man and wife at date of death? If Yes , state in respect of the partner Full names Address Details	Tick Yes or No. Advise common law spouse's full names. Please insert the common law spouse's postal details and code.
Telephone number and area code	This relates to the common law spouse and is useful in event of queries.
Did the deceased support the person financially If yes, please explain the extent of the support	Tick Yes or No. What amount of money or assistance did the person receive from the member?
Did he/she have a regular job If yes, please provide income details and proof thereof.	Tick Yes or No. Self explanatory

SECTION 9. If Divorced

How many times has the deceased been divorced How many ex-spouses are still alive At date of death was the deceased supporting the ex-spouses	Self explanatory Self explanatory Tick yes or no. If yes please advise if it was either voluntarily or in terms of a maintenance order/agreement.
If Yes state in respect of the ex-spouses part a) Full names Address details	Self explanatory Please insert ex-spouse's postal details and code.
Telephone number and area code	This relates to the ex-spouse and is useful in event of queries.
Monthly maintenance	Please insert the amount he/she is receiving.
Has the ex-spouse re-married If no please provide current income	Tick yes or no. Self explanatory
Part b), only complete if there are more than one ex-spouse	Complete as above for part a).

SECTION 10. Major Children of the deceased

a) Full Names

Address

Occupation

Self explanatory

This is the child's full postal address.

Please advise the child's current employment details.

b) Full Names

Complete this section if there is more than one child.

Address

This is the child's full postal address.

Occupation

Please advise the child's current employment details.

SECTION 11. Minor Children of the deceased.

Name of child

Self explanatory

Identity number

Self explanatory. If no Identity number is available, please provide us with the Date of Births.

Guardians name and address

Please advise the address and postal code of the guardian.

Name of mother

Please advise the name of the mother if the deceased had children from more than one woman.

Financial dependence (partial/complete)

Was the child receiving partial or complete financial assistance from the deceased?

If partial dependent state to what extent

Please advise how much assistance the dependent was receiving.

SECTION 12 List all other financial dependents other than spouses and children mentioned previously.

This section is to be completed where the deceased was giving financial support to Parents, grandparents, brothers, sisters etc.

Full name and address

Please advise full names, full postal address and code of the dependent.

Identity number or date of birth

Self explanatory

Relationship to deceased

Please advise the relationship of the person to the member i.e. grandchild/niece /nephew / brother/sister.

Financial dependence (partial/complete)

Was the dependent receiving partial or complete financial assistance from the deceased?

If partial dependent state to what extent

Please advise how much assistance the dependent was receiving.

TAXATION

Lump Sum Benefits

Municipal Councillors Pension Fund Administration Office is compelled by legislation to apply to a member's Receiver of Revenue for a tax directive before any cash lump sum benefits may be paid to the member or his dependents.

If tax is payable, the amount of tax will be deducted from the cash benefit and paid over to the Receiver. A tax certificate (IRP5) will be issued to the member or his / her dependents by Municipal Councillors Pension Fund Administration Office indicating the gross benefit and the tax deducted. This tax certificate should be submitted to the Receiver of Revenue with the normal assessment form at the end of the tax year.

Please note that if the benefit is paid after the member's date of exit, the Fund may also pay interest (referred to as late payment interest). Though this late payment interest is taxable in the hands of the member, we do not deduct any tax from the late payment interest. The member should however declare this late payment interest when completing the normal assessment form at the end of the tax year. We advise the SARS of the late payment interest that was paid.

PRIOR CLAIM BY MUNICIPALITY

The Pension Funds Act restricts the recovery of debts due to the Municipality or to the Fund from benefits payable to departing members or their beneficiaries, to the following

1. Housing loans granted by the Municipality
2. Guarantees supplied by the Municipality in respect of housing loans; or
3. Compensation (including legal costs incurred by the Municipality) in respect of damage caused to the Municipality by reason of theft, dishonesty, fraud or misconduct by member in respect of which:
 - (a) the member has in writing admitted liability to the Municipality;

Or

 - (b) Judgement has been obtained against the member in any court of law.

The Municipality should accordingly bear these restrictions in mind when considering loans and other advances to fund members.

Municipal Councillors Pension Fund Administration Office is compelled to ensure that this provision of the Act is complied with and it will be necessary for a **Prior Claim Form** to be completed and submitted with any exit documents when a prior claim is exercised.

**PRIOR CLAIM BY MUNICIPALITY
EXPLANATION OF FORM**

FUND DETAILS

Name of Fund	Insert: Municipal Councillors Pension Fund and pay point
Fund Code	Insert the fund code as allocated
Surname, Initial & Title	Self explanatory
Reference Number	Insert member's salary number

SECTION 1 Details Of Debt

Date Debt incurred by Employee	Insert the actual date that the debt was incurred by the employee.
Cause of Employee's Debt	Indicate with an 'X'.
Housing Loan / Guarantee	Indicate with an 'X'.
Compensation for Damage caused by Employee	Indicate member's conduct with an 'X'. Please attach a copy of the employee's written admission of liability; or an order of court

SECTION 2 Details Of Payment

Amount Claimed	Insert the total amount to be recovered from the employee.
Payee Name	Insert the name of the payee. This could be the bank or the Municipality
Method of Payment	Please tick cheque or EFT. Please complete the banking details
Address of Payee	Insert payee's postal address in order for them to be notified of payment.

DIVORCE SETTLEMENTS

In terms of the Divorce Amendment Act of 1989 the non-member spouse are entitled to a portion of the member's pension benefit on divorce. This should however be specified in the divorce settlement, and if properly done, the Fund will pay the benefit to the non-member spouse on exit.

Please note the following:

- The pension benefit is defined as the withdrawal benefit at date of exit.
- The percentage share of the pension benefit allocated to the spouse must be specified in the court order. This will be calculated as at the date of divorce.
- The fund must be specified in the court order. See below.
- The member will be responsible for the tax on the whole amount. However, the member can recover it from the non-member spouse.
- The non-member spouse will not be entitled to any interest from the fund.
- The fund will make a note of the divorce settlement and pay it to the non-member spouse if the divorce settlement has been worded correctly.

Examples

- The fund is named as one of the parties in the divorce settlement and a court order is issued against the fund instructing it to make a note of the divorce settlement. This is the correct procedure that should be followed on divorce.
- The divorce settlement specifies that 50% of the pension benefit in the ABC Pension Fund is payable to the spouse. We will accept this and make a note on the member's record.
- The divorce settlement specifies that 50% of the pension benefits is payable to the spouse. As the name of the fund has not been specified, we will not make a note on the member's record. The spouse will still be entitled to the benefit, but she must claim it directly from the member.
- The divorce settlement specifies that 50% of the estate is payable to the spouse. The spouse is not entitled to any pension benefits, as it does not form part of the estate, even if the marriage was in community of property.

Procedure to be followed:

- 1) On divorce, if the non-member spouse is entitled to a portion of the pension benefit, the divorce order must be forwarded to Municipal Councillors Pension Fund Administration Office. .
- 2) If the divorce order is properly worded (see above), Municipal Councillors Pension Fund Administration Office will make a note on the member's record.

When the member receives a benefit from the fund, the benefit payable to the non-member spouse will be paid to her / him directly.

FUNERAL POLICY

Funeral benefits are provided through ABC Group Risk

The following benefits are provided:

Member	R40 000
Spouse	R40 000
Children:	
Aged 14 years to 21 years	R30 000
Aged 6 years to 13 years	R20 000
Aged 1 years to 5 years	R10 000
Aged 1 month to 11 months	R 10 000
Stillborn children	R 10 000

- Up to a maximum of 3 Spouses and 7 children.

Claims Procedure:

Claim forms should be send to Municipal Councillors Pension Fund Administration Office directly together with the following documentation:

- Fully completed Claim Form with correct payment details;
- Certified copy of the Identity Document or Child's birth certificate of the Deceased Assured Person;
- Original certified copy of the Identity Document of the Claimant;
- Copy of the Death Certificate of the Deceased Assured Person and the Form BI1663;
- In the case of a Spouse, a marriage certificate or affidavit.
- In the case of an illegitimate or adopted child, a copy of the adoption certificate, a copy of "The Full Birth Certificate" and any affidavit or other documentary proof as may be required and satisfactory to Momentum.
- In the case of a stillborn child, a letter from the doctor confirming length of pregnancy.
- A "Police Report" or "Doctor Letter" in the event of death by unnatural causes.

ROLES AND RESPONSIBILITIES SUPPORTING THE ADMINISTRATION

Administration Manager

- f) The Administration Manager is responsible for ensuring a smooth running of administration processes by ensuring the following:
- liaise with the PEO/CO attend to any enquiry that may occur regarding different funds
 - ensure that contributions from all clients are received timorously
 - put in place solution orientated mechanisms to recoup arrears from non- contributing clients
 - ensure the balancing of monthly contributions
 - ensure that benefits are calculated correctly according to the Rules of the Fund before payment can be executed
 - liaise with Actuaries and Insurance Companies in respect of payment of benefits
 - supervise timorous payment of benefits
 - resolve all problems relating to benefits distribution
 - check the recommendations for death benefits and resolution before payment