

NTUC Income Insurance Co-operative Limited

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an NTUC Social Enterprise

Share Nominee Form					
Name of Shareholder		NRIC No.		Member Code	
Address					
Contact No.		Email			
(H) (O) (HP)					
I hereby nominate the persons named in the schedule as my nominees, in accordance with Section 45 of the Cooperative Societies Act, Cap 62, to receive at my death their respective proportions of all sums payable by Income for the redemption of my Income shares under Clause 9 (vii) of the by-laws.					
Schedule of Persons Nominated					
Full Name & Address	Age	NRIC/BC No.	Relationship Percentage of redemption monies to be paid (total 100%)		Percentage of redemption monies to be paid (total 100%)
In the event that my nominee(s) has/have not attained the age of 18 a	at my de	ath, I hereby appoint			
Trustee					
Name (Mr/Mrs/Miss/Mdm)					
NRIC No.					
Contact No.					
(H) (O)		(HP)			
Address					
as trustee to receive the monies on behalf of the minor nominee(s).					
Signature of Shareholder					
Signature of Shareholder					
Dated this day of 20					
Witness (1) Witness (2)					
Signature		Signature	اعتناا	,	
Full Name		Full Name			6
NRIC No.		NRIC No.			
Address		Address			
Contact No.		Contact No.			
Email		Email			-