

Retirement Reward Plan Deceased Member Notification



This form is to notify Avant of the death of a member who may have been eligible for the Retirement Reward Plan.

1. Member ID			
Member ID		Name of deceased member	
Date of birth of deceased member		Date of death	
2. Documents required			
Please provide a certified copy of probate or letter from the Executor			
3. Executor who completed this form details			
Name			
Address			
Telephone		Mobile	
Relationship to the deceased			
Signature			
Print name		Date	

Please return this form to **Avant Insurance Limited PO BOX 746 Queen Victoria Building NSW 1230**,
or email memberservices@avant.org.au or contact us on **1800 128 268**.