

Designation of beneficiaries in the event of death – Surviving partner

This form is to be completed, **signed** and returned to the Fonds de Pensions Nestlé.

Last name _____ First name _____
Member number _____ Date of birth _____

A partner is deemed to be the person, of the same or opposite sex, who fulfills the following **cumulative** conditions:

- a. they are not married and have not concluded a registered partnership (with the member or any other person)
- b. they are not related to the insured member
- c. they have shared a common life with the member for an uninterrupted period of at least 5 years immediately prior to the member's death, or must contribute to the maintenance of one or more of the couple's children.

Partner's data

Last name _____ First name _____
Date of birth _____ Address _____

I hereby designate the above mentioned person as the beneficiary of the surviving partner's pension.

The validity of the particular dispositions regarding the beneficiary of the surviving partner's pension is subject to the regulatory and legal provisions in force at the time of death. I take note that, according to the applying regulations, the designation is only valid if the designated partner fulfills the cumulative conditions.

The surviving partner must assert their claim towards the Fund in writing within 12 months, submitting proof that they satisfy the qualifying conditions for a partner.

This designation may be cancelled in writing at any time. The cancellation shall take effect upon receipt by the Fonds de Pensions Nestlé.

I hereby confirm having taken note of the regulations related to the surviving partner's pension as well as to the lump-sum death benefit without survivor pensions mentioned in the Savings plan - Practical Guide of the Fund.

Date and place _____ Signature _____