

Account details

PENSION PAYOUTS

Personal details

Name

Personal ID no
/Date of birth.

Account into which the survivors pension should be paid

Clearing no./Swift address

Account no./IBAN no

Name of bank and address

Send this form to:

VFF Pension
TSG:5
405 08 Gothenburg
SWEDEN

Signature

Place and date

Email address

Signature

Phone no.
