



# Comrade Trustee Services Limited

TRUSTEE FOR THE DEFENCE FORCE RETIREMENT BENEFIT FUND

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Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

The Manager- DFRBF Member Service

Dear Sir/Madam

## **SUBJECT: SIX MONTHS PENSION ADVANCE PAYMENT**

I hereby wish to formally apply to the Comrade Trustee Services Limited for a (6) six month advance of my DFRBF pension benefit as per the terms and conditions of the pension policy. The proposed period in which my pension shall be advanced will include the pay period ending \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ for the total amount of K\_\_\_\_\_ equivalent to 13 fortnights.

1. Given Names: _____	Surname: _____	Date of Birth: ____/____/____
Pension No: _____	Service No: _____	

### 2. TYPE OF PENSION (Tick appropriate box)

Retirement     
  Medical     
  Widow     
  Child     
  Power of Attorney

### 3. POSTAL ADDRESS & CONTACT DETAILS


Phone No:

Fax No:

Mobile No: \_\_\_\_\_

### 4. BANK ACCOUNT DETAILS

<b>Account Name</b>	
<b>Account Number</b>	
<b>Type of Account</b>	
<b>Bank &amp; Branch</b>	

### 5. REASON FOR THIS ADVANCE:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Pensioners Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### 6. FOR OFFICIAL USE ONLY

Received by CTSL Officer: _____	Date: ____/____/____	Signature: _____
Checked by: _____	Date: ____/____/____	Signature: _____

