

# PPF PENSIONS FUND

Director General  
PPF Pensions Fund  
P.O. Box 72473  
Dar es Salaam, Tanzania  
Tel.:2113919/22. 2110642  
Fax: 2117772



Employer's No:.....  
Member Number:.....

## RE: MEMBER PARTICULARS AMENDMENT FORM

### PART I: EMPLOYER'S PARTICULARS

Name of Employer:.....

Authorised Officer:\_\_\_\_\_Signature:.....

Date:..... Official Stamp:.....

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### PART II: CURRENT EMPLOYEE'S PARTICULARS

#### Member Name:

First Name:.....

Surname:.....

Middle Name:.....

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### PART III: CHANGE OF EMPLOYEE'S PARTICULARS

#### Change of Member Name:

##### **Current Name:**

First Name:.....

Surname:.....

Middle Name:.....

##### **New Name:**

First Name:.....

Surname:.....

Middle Name: .....

#### CHANGE OF BENEFICIARIES

##### Spouse:

##### **Spouse Name:**

First Name:.....

Surname:.....

Middle Name:.....

**Change of Children/Addition of Children:**

**Current Child/Children**

**Date of Birth**

- 1).....
- 2).....
- 3).....
- 4).....

- ..... / ..... / .....
- ..... / ..... / .....
- ..... / ..... / .....
- ..... / ..... / .....

**New Child/Children**

**Date of Birth**

- 1).....
- 2).....
- 3).....
- 4).....

- ..... / ..... / .....
- ..... / ..... / .....
- ..... / ..... / .....
- ..... / ..... / .....

( dd / mm / yy )

Email Address (if available): .....

Telephone : .....

Signature:  Left Thumb Print:

**Note:**

Please ensure you attach the necessary documents for the changers made, eg:

1. **Deed poll for change of name**
2. **Marriage certificate**
3. **Birth certificate of children**

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**PART IV: Official Use**

Date Amendment Form Received ..... / ..... / .....  
( dd / mm / yy )

Employee's Membership Number:.....

Name of Authorised Officer.....

Signature..... Date:.....