

## **Deceased Notification Form**

We're sorry for your loss and are here to help you during this difficult time.

Notification of a Deceased Member will be accepted prior to providing this form and required documents. Please contact our Administration Team on 1300 364 400 or at deceasedestates@gcmutual.bank to advise us.

To allow us to best assist you, please complete the required sections to the best of your ability. If you are unable to provide certain details or documents at this time, please leave this space empty and we will contact you prior to finalisation of the accounts held in the name of the Estate. If you require assistance completing this form or help with other matters relating to the management of the accounts held in the name of the Estate, please contact us.

For further information on the process for when dealing with the loss of a loved one, please refer to our Deceased Estate Guide.

Deceased member details							
Member numl	oer (if known)	Title	Surname		First name		
Residential address (Unit no./ Street no./ Street name)  Suburb/Town  State  Postcool							
Date of birth	Data	of death	Cord number least 4	dicita (if kn avva)			
Date of birth	Date	or death	Card number last 4	aigits (ii known)			
Notifying	party details						
Surname		First name					
Residential add	dress (Unit no./ Street no./	Street name)	Suburb/Tow	'n	State	Postcode	
NA 1:1 /11	1	D . (I		address			
Mobile/Home	pnone	Date of b	irtn Email	address			
Dalatianalain t	- +h - D						
Relationship to the Deceased:							
Partner Child (over 18) Parent Sibling Other (please specify)							
Your role in management of the Estate:							
Executor/Administrator Immediate Next of Kin None/Unsure							
Notifying	party identif	ication					
			J. E	1.			
You will need to complete the below section if you are the Estate representative or are seeking payment or reimbursement of funeral or Estate expenses. To satisfy Government Regulations it is necessary for the Bank to identify you, via <b>one</b> of the below options:							
Option 1	Provide one of you	r existing G&C Mu	tual Bank member numb	ers:			
Option 2 Provide this form along with acceptable identification documents to staff at a G&C Mututal Bank Service Centre for certifying.							
Option 3	Option 3 Provide certified copies of your identification documents to deceasedestates@gcmutual.bank or mail to PO Box A253, Sydney South NSW 1235.						
I acknowledge the information I have provided is correct							
Signature			Date				

Last Will and Testament							
Attached No (If there is no Will, Letters of Adminis To follow (Please deliver to your nearest G&C Mutual B Identification of Executor/s if not already a member of G&C Attached Administrator to follow  Member number (if Executor/s are G&C Mutual Bank mem  Probate  Probate is the process of officially proving the validity of a North Company of the process.)	ank Service Centre or mail a certifie C Mutual Bank bers):						
action when releasing no more than \$15,000. All enquiries regarding Probate and Letters of Administration must be referred to the Deceased Estates Officer.  Administrator or Executor of Estate (if applicable)							
Please advise the name of person/s, solicitors or trust comp		Estate. If applicable.					
Surname First name	Company						
Address (Unit no./ Street no./ Street name)	Suburb/Town	State Postcode					
Mobile/Home phone Email address  If using a solicitor:  G&C Mutual Bank to liaise with your solicitor G&C	C Mutual Bank to liaise directly with y	you					
Death certificate							
Confimation is required by way of a certified copy of the or  Attached  To follow (Please deliver to your nearest G&C Mutual B		d copy to our postal address.)					
Direct debits and periodical payment	S						
Do you require a list of all direct debits and recurring paym  Upon receipt of deceased customer notification all direct d debit or periodical payment arrangements are to continue	nents? Yes No	pe cancelled. If any ongoing direct					

Executor's instructions for administration or Estate upon finalisation						
Executor name (1)	Signature (1)	Date (1)				
Executor name (2)	Signature (2)	Date (2)				
Executor name (3)	Signature (3)	Date (3)				

Please review G&C Mutual Bank's Privacy Notice on the next page

## **Next steps**

Once you have completed this form please attach the following documents or make arrangements to obtain a copy for forwarding to us:

- Will (or Letters of Administration)
- Death certificate
- Funeral invoice (if applicable)

Please don't send original documents – certified copies only. And return to G&C Mutual Bank by:



## < Mail

PO Box A253, Sydney South NSW 1235



deceasedestates@gcmutual.bank



By visiting a Service Centre

We're here to help, if you need assistance completing this form or have any questions, call us on **1300 364 400**, drop into your local Service Centre or refer to our **Deceased Estate Guide** on our website.