PSPB PUBLIC SERVICE PENSIONS BOARD Securing Tomorrow, Together

Dependent Child's Name:

The Public Service Pensions Plan

Designated Guardian Election Form

(Section 20 of the Public Service Pensions Law, 2017 Revision)

This form should be used to specify a Designated Guardian under the Cayman Islands Public Service Pensions Plan. You may choose any person as a Designated Guardian to any of your dependent children, who may receive a pension or lump sum on behalf of your dependent child in certain circumstances on your death.

First:

Please print clearly on the lines below:

	Middle:			
	Last:			
Dependent Child's Date of Birth:		Day	_ Month	Year
Designated Guardian's Name:	First:	Ī		
	Middle:			
	Last:			
	Salutation:	Mr / Mrs /	Miss / Other	
Guardian's Address:	Street:			
	District:	Ī		
	Island:			
	Zip:	Ī		
P. O. Box and District:				
Telephone Number:				
Relationship to Child:		Ī		
I understand that this election sup have made in the past in respect	persedes any other of the child named a	Designated at the top of	Guardian ele this form:	ctions that I may
Participant's Name (Please Print)				
Signature:		Date:		
Email address:				