UNITED NATIONS JOINT STAFF PENSION FUND

NEW YORK (Headquarters) c/o United Nations P.O. Box 5036 NY, NY 10163-5036 **Tel: (212) 963-6931**; Fax: (212) 963-3146

E-mail: <u>UNJSPF@UN.ORG</u>
Web: <u>http://www.unjspf.org</u>

OFFICE AT GENEVA
PALAIS DES NATIONS
CH-1211, Geneva 10
Tel: +41 (0) 22 928-8800; Fax: +41 (0) 22 928-9099
E-mail: UNJSPF.GVA@UNJSPF.ORG
Web: http://www.unjspf.org

CHANGE IN PAYMENT INSTRUCTIONS

IMPORTANT
Please Enter Your
Retirement Number

<u>LEASE PRINT</u> R TYPE		R/
(SURNAME)	(FIRST)	(M I D D L E)
elephone No:	e-mail:	
MAKE PAYMENT TO MY AC	COUNT AS FOLLOWS:	
CURRENCY OF PAYMENT:	(Please specify)	
NAME OF FINANCIAL INSTIT	UTION	BANK ACCOUNT NUMBER
(NAME OF BRANCH, IF APPL	CABLE)	
(ADDRESS)	0	btain from your bank a SWIFT, ABA, Routing, BLZ, ABI, CAB, IBAN or sorting code, etc. as required for wire transfer
(CITY, STATE, POSTAL CODE,	COUNTRY)	
IOTE. If possible, for bank accounts of dicating bank codes and preferred re	outside the USA and Switzerland <u>ONL</u> outing to facilitate the receipt of your l	Y, please provide a document from your bank benefit.
or administrative reasons, the above paymen	nt instructions will have to remain in force for a	at least one year.
Date:	Signature:	

NOTE: The completed form bearing your original signature must be submitted to the Fund, no faxes or e-mails will be accepted. Following the receipt of the form, the required change might take up to 6 weeks to implement.