

COLUMBUS RETIREMENT FUND CONTRIBUTION OPTION FORM

Name: _____

Co No: _____

Cost Centre: _____

Payroll: _____

CRF CONTRIBUTION OPTION

Employee Contribution													
5%	6%	7%	8%	9%	10%	11%	12%	13%	14%	15%	16%	17%	17.5%

The total contributions consist of your savings contribution above and the following employer contributions.

Employer Contribution	
Savings	7.5%
Administration and Death Cover	2.5%
TOTAL	10.0%

Disability Cover (PHI)	2.693%
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You may also elect to make Ad-hoc Lump Sum Contributions and monthly Additional Voluntary Contributions through a Payroll deduction to the Columbus Retirement Fund.

Note however that the combined tax-deductible Employer plus Employee contributions are limited to 27.5% of your taxable income or R350, 000 a year.

Please indicate your choice below:

Ad-hoc Lump Sum Contribution
R _____

Monthly Additional Voluntary Contributions (Only if you are already on the maximum contribution according to table above) <i>(Please round to the nearest R50)</i>
R _____

I understand the implications of this contribution choice on my current cash flow and on my future retirement plan.

Name

Signature

Date