

FUNERAL BENEFIT CLAIM FORM

YOUR DETAILS			
Name of Member			
Member Number			
Residential Address:			
State:		Postcode:	
Mobile No:		Telephone No:	
Email Address:			
DECEASED DETAILS			
Name of Deceased:			
Relationship to Member:			
Address:			
State & Postcode:		Telephone No:	
Date of Birth:		Date of Death:	
SPOUSE ONLY			
Are Child Care Benefits Claimed?		Ages of Surviving Children:	
DECLARATION			
I,	of		hereby declare
	(Executor/Beneficiary)	(Enter Address)	
1. That the deceased named above was an eligible person under this policy; and			
2. That the amount paid represents the full and final Death Benefit entitlement and that the payment of this amount represents a full and final discharge of each and every liability to the ReddiFund Discretionary Trust Arrangement under the Policy in respect to this claim.			
3. A copy of the invoice for the funeral expenses and a certified copy of the death certificate has been provided.			
4. The information and answers given in this document are true and correct. No information likely to affect the acceptance of this claim has been withheld.			
5. I understand that this claim may be refused if any information is false, or inaccurate or concealed.			
6. I/we the undersigned hereby acknowledge and agree to the information contained herein (including our personal information) being shared with the other members of our Discretionary Trust (Trust) as part of the Trust's Risk Management processes and reporting criteria and with Reddifund as may be required to assist in the management of this claim and the administration of the Trust.			

BANKING DETAILS

Name on Funeral invoice			
Relationship to the member			
Account Name			
What relationship is this person (or entity) to the member			
Bank Name			
BSB			
Account Number			
Declared at this day of:			
For and on behalf of: (Please Print Name):		Witness:	
Name:		Signature:	

THIS FORM SHOULD BE COMPLETED AND RETURNED TO:

Echelon Claims Services - GPO Box 1693, Adelaide SA 5001

Email: ecssa@echelonaustralia.com.au Phone: 08 8235 6455 or Free call 1800 640 009

PLEASE PROVIDE/ATTACH ALL RELEVANT DOCUMENTS INCLUDING DEATH CERTIFICATE AND FUNERAL INVOICE.



ECHELON AUSTRALIA PTY LTD

ABN 96 085 720 056

COLLECTION STATEMENT UNDER PRIVACY ACT 1988 (Cth)

In accordance with the Privacy Act 1988 (Cth) and any subsequent amendments (the Privacy Act), we Echelon Australia Pty Ltd (Echelon), including Echelon Claims Services, draw your attention to the following:

- We may collect personal information about you by means of the enclosed document.
- We are collecting the information principally for any of the following purposes (depending on your requirements):
 - approaching the (re)insurance market;
 - placing insurance or providing alternative coverage;
 - assessing and advising you on your insurance or coverage needs;
 - providing claims handling or risk management services;
 - providing you with information about other JLT products or services; and
 - administering payments to you.
- The information we collect may be disclosed to third parties including but not limited to: (re)insurers, insurance intermediaries, service providers, finance providers, advisers, agents and other Echelon related group companies, such as JLT Risk Solutions Pty Ltd and JLT Group Services Pty Ltd. Echelon is a business of Marsh and McLennan Companies (MMC). Those entities will hold and use the data in accordance with their own privacy policies which may include disclosure to third parties located offshore.
- Your personal information may be sent to our administrative processing centers in Mumbai (India) or Kuala Lumpur (Malaysia). It may also be sent to: Bermuda, Brazil, China, Dubai, Hong Kong, Ireland, Japan, Singapore, South Korea, United Kingdom and the United States for the purposes of outsourcing Insurance Broking, Intermediary and Risk Advisory Services; and Canada, India, United Kingdom and the United States for the purposes of outsourcing Business Support Services (for example, IT systems administration and payment processing).
- If you provide us with personal information about other individuals, you must ensure that those persons have been made aware of the above matters. Where the information collected relates to health, criminal record or other sensitive information as defined in the Privacy Act, you must obtain it with the individual's consent.
- By providing this information, you agree to us collecting, using and disclosing your personal information as outlined in this Collection Statement.
- If you do not provide all or part of the information requested, we may be unable to process your application or claim or provide other required services.
- You have the right to request access to, and correct, any personal information that we hold about you, subject to the provisions of the Privacy Act.
- To assist us in maintaining correct records we ask you to inform us of any changes in your personal information provided as they occur.
- We will use and disclose your personal information in accordance with our Privacy Policy. Our Privacy Policy can be accessed on our website (<https://www.echelonaustralia.com.au/privacy>).
- For further information contact your Account Executive, Claims Manager or our Privacy Officer at the following address:

Echelon Australia Pty Ltd, One International Towers, 100 Barangaroo Avenue, SYDNEY, NSW, 2000. Telephone: +61 (02) 8864 7688. Email: privacy.australia@marsh.com