C P I C

BENEFICIARY CLAUSE

The undersigned beneficiary:

Surname/first name:
.....

Born on: ..... in.....

Domiciled at: .....

…….....

Designation of the rightful claimants as per Art. 13 of the By-Laws (drawn up in keeping with the corresponding article of the Swiss Occupational Pensions Act, LPP/BVG), for the CAISSE DE PRÉVOYANCE DES INTERPRÈTES DE CONFÉRENCE (hereinafter CPIC):

RIGHTFUL CLAIMANT(S) as per Art. 13, para. 1, letter a:

Specify the surnames, first names, dates of birth and the precise addresses of the designated persons.

☐ SPOUSE or ☐ CIVIL PARTNER
notified to CPIC during the beneficiary's lifetime by means of the CPIC Partnership Contract

No children: 100% of the capital (by default)

With child(ren) (minor(s) and adult(s)): minimum of 50% of the capital
(otherwise specify a percentage between 50% and 100%)

SURNAME	*FIRST NAME*	*DATE OF BIRTH*	*ADDRESS*	*%*
.....			.....	..... %

☐ CHILD(REN) (minor(s) and adult(s)): % of the remaining capital (max. 50%) in equal shares
(otherwise specify a percentage between 0% and 50%)

SURNAME	*FIRST NAME*	*DATE OF BIRTH*	*ADDRESS*	*%*
.....			.....	..... %
.....			.....	..... %
.....			.....	..... %
.....			.....	..... %
.....			.....	..... %
.....			.....	..... %
.....			.....	..... %
.....			.....	..... %

CAISSE DE PRÉVOYANCE DES INTERPRÈTES DE CONFÉRENCE
51, rue du Stand – 1204 Genève

AG/24.05.2025
CF/24.05.2025

In the absence of rightful claimants as per Art. 13, para. 1, letter a:

RIGHTFUL CLAIMANT(S) as per Art. 13, para. 1, letter b:

Specify the surnames, first names, dates of birth and precise addresses of the designated persons together with the allocated percentages.

ANY PERSON notified to CPIC during the beneficiary's lifetime by means of the CPIC Substantial Support Contract, for whom the beneficiary provided substantial support at the time of their death: maximum of 50% of the capital (with the remaining balance allocated as per Art. 13, para. 1, letters c and d).

Substantial support means that the deceased has paid at least 50% of the essential expenses of the person designated as per Art. 13, para. 1, letter b of the By-Laws for a period of at least five years immediately prior to their death (proof required).

SURNAME	*FIRST NAME*	*DATE OF BIRTH*	*ADDRESS*	*IF APPROPRIATE FAMILY TIE*	*%*
.....				.....	..... %
.....				.....	..... %
.....				.....	..... %

In the absence of rightful claimants as per Art. 13, para. 1, letters a and b:

RIGHTFUL CLAIMANT(S) as per Art. 13, para. 1 letters c and d

Specify the surnames, first names, dates of birth and precise addresses of the designated persons together with the family relationships and the allocated percentages.

FATHER AND MOTHER, BROTHERS AND SISTERS, NEPHEWS, NIECES and, failing those, OTHER LEGAL HEIRS (blood relatives)

SURNAME	*FIRST NAME*	*DATE OF BIRTH*	*ADDRESS*	*FAMILY RELATIONSHIP*	*%*
.....				.....	..... %
.....				.....	..... %
.....				.....	..... %
.....				.....	..... %

The beneficiary certifies that the information provided to CPIC is accurate and that the list of rightful claimants is exhaustive.

CPIC is not required to check the information received from its beneficiaries and cannot be held liable for any inaccuracies, omissions or failure to update such information.

The present clause shall be deemed valid until amended by a new clause, in writing, from the beneficiary that is duly communicated to CPIC.

Place ..... Date .....

The Beneficiary:

.....