

7 things you should know about the Bereavement Benefit Fund

HSUWA Member Benefits Bereavement Benefit Fund

HSUWA family members may have access to financial assistance on the death of a HSUWA member, through our special fund – the Bereavement Benefit Fund (**Fund**).

Financial stress often adds to trauma people can experience in the death of a loved one in the family.

Sometimes bank accounts can be frozen, and your family is faced with the bleak task of trying to scrape through for several weeks on the money available at the time.

What is the fund?

The Fund is designed to help alleviate any immediate financial difficulties a member's family may have on the member's death.

What does it cost?

Nothing. The Fund is financed from HSUWA member contributions.

What is the value of the benefit?

\$5,000 (Note: The fund has an annual capped limit of \$50,000).

Who is the benefit paid to?

When you join the union, you will be asked to Nominate a Beneficiary for the Fund. Then in the event of a members' death and contact from the family, the Nominated Beneficiary may be

paid the benefit – this may be the mother, father, spouse, child or any nominated person.

How do I nominate a beneficiary?

Complete the Nomination Form overleaf and return it to the HSUWA. If you need further information, please contact the HSUWA office on 9328 5155. Please note records of the Fund are strictly confidential.

What happens if I don't nominate a beneficiary?

From time to time the Union receives a request to make a benefit payment when there is no record of a Nominated Beneficiary. Without obligation, the Union may agree to a make payment from the Fund to a person the Union deems to be your next of kin.

More on the process

As the Fund is to provide financial assistance, the payment is generally made available to the Nominated Beneficiary as soon as practicable after the member's death. It is intended to be used towards the cost of the member's funeral and associated expenses and/or to assist with bills, such as, rent, mortgage, groceries, and/or the payment of outstanding bills, credit cards etc.

The Fund is administered and payments made at the sole discretion of HSUWA.

HSUWA Bereavement Fund Nomination of Beneficiary

About You

HSUWA Member Number: _____

Your Name:

(Given name)

(Surname)

Date of Birth:

_____/_____/_____

Your Signature:

Today's Date:

_____/_____/_____

About Your Nominated Beneficiary

Beneficiary's Full Name:

(Given name)

(Surname)

Identifying Signature of your Nominated Beneficiary

If you cannot get the beneficiary to sign this form
please give some other means of identification
(e.g. date and place of birth).

Today's Date:

_____/_____/_____

IMPORTANT

Please keep a copy of this form with your personal records.

Return the completed form to one of the following:

Mail: HSUWA, PO Box 8204 Perth Business Centre PERTH WA 6849

Fax: 9328 9107

Email: union@hsuwa.com.au