



Pensionskasse

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**Confirmation of being alive (please in block letters):**

Proof of life for the calendar year: \_\_\_\_\_

\_\_\_\_\_  
surname

\_\_\_\_\_  
first name

\_\_\_\_\_  
ASVG number

\_\_\_\_\_  
place of residence

\_\_\_\_\_  
Optional – e-mail address

\_\_\_\_\_  
date and signature

**ATTENTION!**

**Please have this section confirmed by your bank or another public authority!**

\_\_\_\_\_  
place and date

\_\_\_\_\_  
stamp and signature of bank or public authority