

Proxy/Authorisation

- Proxy** The person/administration mentioned represents me fully towards the Compensation offices EXFOUR for the transactions marked with a cross.
- Authorisation** The person/administration mentioned is authorised to obtain information from the Compensation offices EXFOUR pertaining to the transactions marked with a cross.

Please mark the transactions concerning you with a cross

- | | | |
|-------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> OASI pensions | <input type="checkbox"/> Contributions to OASI/DI/IC | <input type="checkbox"/> DI measures (medical/professional) and health aids |
| <input type="checkbox"/> Supplementary benefits | <input type="checkbox"/> Compensations for loss of earnings | <input type="checkbox"/> DI pensions, DI daily allowances (DI office and compensation office) |
| <input type="checkbox"/> Care funding | <input type="checkbox"/> Family allowances | <input type="checkbox"/> Helplessness allowances (DI office and compensation office) |
| | <input type="checkbox"/> Maternity benefits | |

► **This proxy/authorisation is valid for the transactions marked with a cross until revoked in writing.**

Obligation to notify

Changes in the personal and economic situation may affect the amount of certain benefits. For this reason, such changes have to be communicated immediately and unrequested to the OASI agency at your domicile or to the Compensation offices EXFOUR. The signatory notes that benefits drawn unduly must be refunded.

Mandatory

SS No. for natural persons	
Name	First name
Address	PC, town
Telephone	E-Mail
Date	Signature

Mandator

SS No.	or Company affiliate no. (xx.xxx)
Name	First name
Address	PC, town
Date	Signature

► **In case no signature can be obtained for health reasons, a medical certificate has to be provided.**

AHV-Ausgleichskasse Exfour
Malzgasse 16
4052 Basel

To simply return the form: Fold and place in a sufficiently stamped C5 window envelope