

ESTATE BENEFICIARIES' PROXY

The estate beneficiaries' proxy must be signed by all of the estate beneficiaries (use back of the form if necessary).
A copy of the registered estate inventory deed must be attached.

Personal information

Name of the deceased (original rights holder) hereby referred to as Member

Social security number/Date of birth

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Estate

Number of estate beneficiaries

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Authorised representative

Name of authorised representative/executor

Date of birth

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Delivery address

Postal code and city

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Phone number

Email

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Bank/Giro

Account number (including clearing number)

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Swedish Bank:

BIC/SWIFT

IBAN

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International Bank:

Underskrifter

I/we hereby give the above mentioned representative the authority to receive the deceased's SAMI remuneration on behalf of the estate in accordance with the Member's Agreement between SAMI and the deceased performer, and to otherwise represent me/us in respect of the said Member. I/we declare that the Member's Agreement is binding in its entirety, and understand that any future remuneration will be paid to the above mentioned representative until further notice.

Signature

Printed name

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Signature

Printed name

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Signature

Printed name

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Signature

Printed name

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Printed name

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Signature

Printed name

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Signature

Printed name

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Signature

Printed name

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Signature

Printed name

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Signature

Printed name

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Sender

Name

City and date

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