

INCOME VERIFICATION FOR EXISTING MEMBER

Income to declare includes, but is not limited to, average monthly earnings over the last 12 months from guaranteed earnings, guaranteed allowances, company contributions and variable pay or commissions from employment (including self-employment and informal employment), pension and annuity proceeds, interest or dividends earned on active and passive investments, rental income from leasing properties and distributions received from a trust.

Important Notice:

Declaring income lower than your actual income is fraud. This will lead to the immediate cancellation of your membership and you will not be able to join the Scheme again.

Please follow the steps:

Step 1: Fill in all the relevant sections below in black ink, writing one letter in a block. Please print clearly.

Step 2: Please sign this form.

Step 3: Attach all relevant proof of income and other supporting documents we ask for in each section to avoid any administrative delays.

Step 4: Submit the completed and signed form with all required supporting documents to the following email address: membership@rumed.co.za

Please note: The income categories for the 2026 financial year will remain the same as 2025. Contribution increases will be communicated when approved by the Council of Medical Schemes and will be distributed to all members as part of the yearend communication.

SECTION 1 - MONTHLY EARNINGS IN THE HIGHEST INCOME CATEGORY (IN EXCESS OF R30 000)

YES

NO

(If yes, not required to submit supporting documentation)

SECTION 2 - EARNINGS AND REQUIRED PROOF OF INCOME

| | Principal Member | | | | | | | | | |
|--------------------------------|------------------|--|--|--|--|--|--|--|--|--|
| 1.1 Salary or wages | R | | | | | | | | | |
| 1.2 Commission or wages | R | | | | | | | | | |
| 1.3 Pensions or annuities | R | | | | | | | | | |
| 1.4 Income from investments | R | | | | | | | | | |
| 1.5 Rental income | R | | | | | | | | | |
| 1.6 State disability allowance | R | | | | | | | | | |
| 1.7 Trust distributions | R | | | | | | | | | |
| 1.8 Other income | R | | | | | | | | | |

Please submit copies of the following documents to validate the income that you have declared above (not required if highest income indicated):

| Income Type | We will require: |
|----------------|---|
| Monthly salary | A copy of your latest ITA34 (Preferred) If above is not available: Latest pay slip with IRP5 or Letter from your company or employer confirming your monthly income. And 3 months bank statements. (Compulsory) |
| Weekly wages | A copy of your latest ITA34 (Preferred) If above is not available: Your last four pay slips or letter from your company or employer confirming your monthly income. And 3 months bank statements. (Compulsory) |
| Self-employed | A copy of your ITA34 (Compulsory) Confirmation in writing from your external auditor of your income together with 3 months bank statements. |
| Pensioners | A copy of your ITA34 (Preferred) If above is not available: Latest pension statement And 3 months bank statements. (Compulsory) |

SECTION 3 - DECLARATION

Please sign this form to confirm that all the information you have given about your income is correct and that you allow RUMed to verify the income declared. By signing here, you also confirm that you know what the consequences are of giving us information that is not true and correct.

Should we not receive your proof of income by 30 November 2025, you will be placed in the highest income category until verification is received by the Scheme.

Membership Number

Tax Number
(Principal Member)

Cell Number
(Principal Member)

Email address
(Principal member)

Signature of Principal Member

Date