Levnadsintyg/Life certificate

Denna blankett läses maskinellt. Endast information i rutorna registreras.
This form is read by machine. Only information entered in the squares is registered.

Namn/Name

Personnummer/Personal identification number

E-postadress/E-mail address

Telefonnummer/Telephone number

Bostadsadress/Home address

Postnummer/Zip code

Ort/City

Land/Country

Medborgarskap/Citizenship

AMF behandlar dina personuppgifter i enlighet med vår gällande Integritetspolicy, som du hittar på www.amf.se
AMF processes your personal data in accordance with our current Privacy Policy, which you can find on www.amf.se

Underskrift/Signature

Egenhändig namnteckning/Your signature

Datum/Date (yyyy) (mm) (dd)

Intyg av/Certified by:

- svensk ambassad/swedish embassy
- svenskt konsulat/swedish consulate
- svenska kyrkan/swedish church
- utländsk socialförsäkringsinstitution/ foreign institution for social security
- notorius publicus/public notary
- utländsk polismyndighet/foreign police authority
- utländsk registerförande befolkningsmyndighet/ foreign administrative authority for population statistics
- bankverksamhet/bank
- lokalt eller nationellt levnadsintyg/ local or national life certificate

Myndighetens stämpel/Official stamp

Myndighetens signatur/Official signature

Datum/Date (yyyy) (mm) (dd)

Den ifyllda blanketten skickar du till/Send the complete form to:
AMF, c/o Depona, Box 231, SE-151 23 Södertälje, Sweden

584.053 220321