

# Deceased account management form

Please complete this form using block letters and email it to [deceased@vodacom.co.za](mailto:deceased@vodacom.co.za)

## Details of the deceased customer

First name/s

Surname

Cell number

ID number / passport number

## Next of kin details

First name(s)

Surname

Relationship  Contact number

E-mail address

## Action required (Please tick preferred option)

Terminate contract

Convert to Prepaid

Transfer of ownership