



Bereavement Notification

Please return this form to American Express Services Europe Limited, UK Bereavement Support Team, (UMC 87-00-004), 1 John Street, Brighton, East Sussex, BN88 1NH
Alternatively, you may send a scanned copy of this form along with supporting documents to ukbereavementsupport@aexp.com

Completing this form

To be completed when notifying of the death of an American Express® Cardmember.

Please ensure a photocopy of the death certificate is returned with this document if not already provided. Please be aware that by signing this form, you are giving American Express permission to take and hold a photocopy of the death certificate.

All of the fields marked with an asterisk (*) need to be completed in full.

1. Details of the deceased Cardmember

*Title

Mr Mrs Ms Miss

Other

*Date of Birth

*American Express Card number

*First name(s)

*Surname

2. The information below is needed from the nominated third-party contact

(a) Executor

- If available, a photocopy of the Will is required if there is a credit balance on the Account **in excess of £1000**.
- If a Grant of Probate (Certificate of Confirmation in Scotland) has been issued, a photocopy of this is required if there is a credit balance on the Account **in excess of £1000**.
- If there is more than one Executor then please ensure section 3 is completed showing all Executors' information.

(b) Administrator

- A photocopy of the Grant of Letters of Administration (Grant of Confirmation in Scotland) is required.

(c) Next of Kin

- If the deceased Cardmember did not leave a Will and/or Grant of Letters of Administration or Probate (Grant of Confirmation in Scotland), then please fill in the checkbox in section 3 and sign accordingly.
- Where there is only one person acting as next of kin, by signing this form in section 3, you will be confirming that you are solely handling the deceased Cardmember's Account. If there happens to be more than one person handling the deceased Cardmember's Account then please ensure section 3 is completed showing the additional next of kin name(s) and their relationship to the deceased Cardmember. All parties must sign section 3.

3. Nominated third-party contact details

*First third-party representative

*In which capacity are you acting on behalf of the deceased Cardmember?

Executor Administrator Next of Kin

If next of kin where there is no Will or Grant of Letters of Administration or Probate (Grant of Confirmation in Scotland), please specify your relationship to the deceased Cardmember, e.g. Spouse/Civil Partner, child, parent or sibling.

Will – Y/N

*Title:

Mr Mrs Ms Miss

Other

*Date of Birth

*Password of your choice

*Address (include Post code)

*First name(s)

*Surname

*E-mail ID

*Telephone Number

*Signature

Second third-party representative

*In which capacity are you acting on behalf of the deceased Cardmember?

Executor Administrator Next of Kin

If next of kin where there is no Will or Grant of Letters of Administration or Probate (Grant of Confirmation in Scotland), please specify your relationship to the deceased Cardmember, e.g. Spouse/Civil Partner, child, parent or sibling.

Will – Y/N

*Title:

Mr Mrs Ms Miss

Other

*Date of Birth

*Password of your choice

*Address (include Post code)

*First name(s)

*Surname

*E-mail ID

*Telephone Number

*Signature

4. Bank/Building Society Information (Applicable for Accounts with Credit Balance)

*Name of Account Holder

*Bank/Building Society Account Number

*Branch Sort Code

*Bank/Building Society's Name & full postal address:

To the Manager:	Bank/Building Society
Address	
Postcode	