Pension Scheme Account Opening Request (continued)

6. DECLAR	RATION AND SIGNATURE(S) (continu	ued)	
Member Truste Print name	e(s)/Authorised Signatory(ies)	Signature	
Philip And	rew Hippisley	PA. Hypis	lea
Print name			Date 6/7/2017
			2
		[Date
Print name		Signature	
2			Date
Print name		Signature	
			pate
Print name		Signature	
Print name			late
The name		Signature	
		D	ate
7. PROFESS	SIONAL ADVISOR DETAILS		
Name of Company	Pension Practitioner. Com Limite	d	
Address	Daws House 33-35 Daws Lane, London	a .	+
ost code	NW7 4SD	Telephone Number 08006	6344862
Contact Name	Brad Davis / Georgina Stuliglowa		
mail	info@pensionpractitioner.com		