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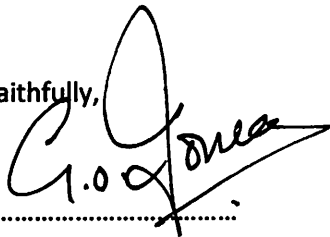
6th February 2017

Dear Sirs,

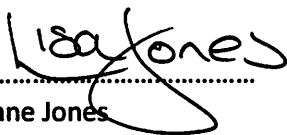
Under the Trustee Resolution dated 18 October 2015 investment decisions concerning Elljess Investments Ltd Executive Pension Scheme are delegated alone to the member Trustees, Geoffrey Owen Jones and Lisa Jane Jones until such time that the Trustees otherwise resolve. Availing ourselves of the powers delegated by this resolution, we wish to inform you of our intention to invest ~~\$100,000~~..... of our fund contained within the Elljess Investments Ltd Executive Pension Scheme into Bar Works.

We confirm our understanding that Pension Practitioner .Com cannot offer advice or recommendations on investments, that we have sought any independent advice we deem necessary to enable the investment into Bar Works and that we know, understand and appreciate the risks inherent with this investment. We also confirm that we assume all responsibility for these risks, that the investment might not be regulated by the Financial Services Compensation Scheme (FSCS) or the Financial Ombudsman Service (FOS), and that we cannot hold Pension Practitioner .Com liable for any loss that may arise from the performance or failure of this investment.

Yours faithfully,



Geoffrey Owen Jones
Member Trustee of the Elljess Investments Ltd Executive Pension Scheme



Lisa Jane Jones
Member Trustee of the Elljess Investments Ltd Executive Pension Scheme

Outward Payment Instruction (Faster Payments & CHAPs)



Store

One Southampton Row

1. Customer details

Customer Name

Eljess Investments Ltd Executive Pension Scheme

Account Number

1 7 9 5 7 3 5 7

2. Payment details

Payment Type



Faster Payment (No Fee) **Faster Payment Maximum Value = £100K. Payments of a higher value must be sent via CHAPs**



CHAPs (£17.50 Fee) **CHAPs Cut Off Time = 3PM. Payments received after this time will be processed Next Day**



Account To Account Transfer

Amount (GBP)

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Date To Process

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Amount in Words

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3. Beneficiary Information

Beneficiary Name

CFX GBP Client Account

Beneficiary Sort Code

2 0 0 0 0 0

Beneficiary Account Number

6 3 2 1 3 4 4 7

Payment Reference (if applicable)

98686

4. Customer Signature

Authorised Signature

G.O. Jones

Date:

7/02/17

Authorised Signature

Date:

FOR INTERNAL USE ONLY - ID & V Confirmed



Customer Photo



Customer Signature



4Tress



ID

(Passport or Driving Licence Number)

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Input By:

--	--	--	--	--	--	--	--	--	--

Signature:

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Date:

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Authorised By:

--	--	--	--	--	--	--	--	--	--

Signature:

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Date:

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