

Benefit Crystallisation Event
Member Questionnaire

Scheme Name: **KAYSTED DIRECTORS PENSION SCHEME**
Member Name: **PETER R. STEDMAN**

Please accept this as my written request to take benefits from the above scheme and confirmation of information in respect of this Benefit Crystallisation Event:

Required Benefits

1. I wish to draw all of my fund in Tax Free Cash and Income
2. I wish to vest segments and take as Tax Free Cash and Income
3. I wish to vest sufficient funds to provide a Tax Free Cash amount of £ **35,000**
4. I wish to vest sufficient funds to provide an annual Income amount of £

Other (please detail)

Will this be your first Benefit Crystallisation Event occurring on or after 06 April 2006 (under any Registered Pension Scheme ?

~~Yes~~
No

If 'No', what was the date of your first Benefit Crystallisation Event occurring on or after 06 April 2006

Date: **Not sure.**

What is the percentage of the SLA used up under those earlier Benefit Crystallisation Events that occurred under any other Registered Pension Scheme you are (or were) a member of, as recorded on your latest scheme statement(s). Copy statement(s) **MUST** be attached.

Name of Registered Pension Scheme
% SLA

Signed:



Date:

13.12.23

Account details of where to pay funds

Account Name

PR & MS STEDMAN

Sort Code

30-96-61

Account Number

00403618.