

Friday, 07 July 2017

PRIVATE & CONFIDENTIAL

Emily McAlister
Pension Practitioner
Daws House, 33-35 Daws Lane
LONDON
NW7 4SD

RE Millstone Construction Transfer Documents

Dear Emily

Further to my previous discussions with Brad regards the above clients we have finally managed to get Discharge documents from the clients existing SSAS which is being closed down. Could you please organise to complete and return to Alltrust a set of these documents for each member to finally facilitate release of the funds.

- Discharge Form Each
- · Payment Authority Fax Sheet

Should you need any additional information please do not hesitate to contact me.

Yours sincerely

Adrian Shakespeare Dip PFS, Cert's CII (MP & ER)

Managing Director

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STEPHEN HOWELLS DOCUMENTS

ALLTRUST SSAS TRANSFER OUT DISCHARGE FORM

ALLTRUST SSAS DETAILS	
SSAS Reference Number	
Scheme Name	MILLSTONE GOSTRUCTION COSION SCHOM
Member Name	STEPHENJ. HOWELS
TRANSFER DETAILS	
I wish my benefits to be transferred to the	ne following Receiving Scheme
	Please lick
Personal Pension Plan or Stakeholder P	lan
Self Invested Personal Pension	
Section 32 Policy	
An Occupational Pension Scheme, inclu	iding a SSAS
Amount to be Transferred	
£	Or All benefits to be transferred
Where benefits have been crystalli	ORTANT NOTE: Ised, the entirety of the arrangement must be ed to a new provider
Name of Receiving Provider	
Contact Name	
Address of Receiving Provider	
HMRC Tax Reference Number	
A copy of the HMRC Registrati	ORTANT NOTE: on Certificate or Approval Letter must be ed with this form

Please note that if any assets are to be transferred In Specie, it is the responsibility of the receiving Scheme Provider to confirm that they are willing to accept the assets.

Member Declaration

I acknowledge and understand that payment of a transfer value, or a transfer of assets inspecie, or a combination of the two, from the Scheme will represent the full discharge of any liability of Alltrust Services Limited.

I also agree that any fees incurred in relation to the transfer may be withdrawn from my Scheme funds prior to transfer.

I warrant in favour of Alltrust that I am not involved in nor am I aware of any arrangement where any payments are or will be made to me or any Connected Party in relation to the transfer value. Furthermore, no payments will be made to a 3rd party which indirectly result in any benefit being received by me or a Connected Party.

I have received and read a copy of the 'Predators Stalk Your Pension' insert and am aware that if an unauthorised payment is made from a registered pension scheme both I personally <u>and</u> my pension scheme will suffer considerable tax penalties.

SIADWELLS 29/06/2017
Signature Me Starlaw Monous Date

IMPORTANT NOTE: INVESTMENT AND PENSION SCAMS DO NOT GET CAUGHT OUT

For further information visit ScamSmart.fca.org.uk or www.thepensionsregulator.gov.uk/individuals/dangers-of-pension-scams.aspx

		ec		

I confirm that the details shown above are correct and that the Receiving Scheme is a registered pension scheme in accordance with the Finance Act 2004 and registered under the HMRC Tax Reference Number shown above.

I have attached a copy of the HMRC Registration Certificate or Approval Letter for the Receiving Scheme.

	\langle		
1	Signature	(/	Date
(/		/\ -{	
X	Name	ŧ	Position
	Company Name		

SIPP FASTER PAYMENT

	AUTHORITY				
X	To: Alltrust Your Reference:	Contact Number: Date:			

Please accept this facsimile as authority to make the following FASTER payment.

From:

SIPP Account Number	58929084		
Account Name	Millstone Construction Pension Scheme		

To:

,	Bank Name	Payee
\	Sort Code	Amount
	Account No	Reference

I authorise Alltrust to utilise the Handelsbanken electronic banking system to make this payment on behalf of my SIPP to the account specified above.

Signed

Steven Howells

Stephen Dicks

STEVEN DICKS DOCUMENTS

ALLTRUST SSAS TRANSFER OUT DISCHARGE FORM

SSAS Reference Number	<u> </u>
Scheme Name MILLSTONE Con	STEVETION (SUSION)
Member Name S73VBN Di	UKS
TRANSFER DETAILS	
I wish my benefits to be transferred to the following Receiving :	Scheme
	Please Tick
Personal Pension Plan or Stakeholder Plan	
Self Invested Personal Pension	
Section 32 Policy	
An Occupational Pension Scheme, including a SSAS	
£ Or All benefi	ts to be transferred
IMPORTANT NOTE: Where benefits have been crystallised, the entirety of the transferred to a new provider	arrangement must be
Where benefits have been crystallised, the entirety of the transferred to a new provider Name of Receiving Provider	arrangement must be
Where benefits have been crystallised, the entirety of the transferred to a new provider	arrangement must be

returned with this form

Plan / Policy Number Assets to be Transferred In Specie Documentation to be Receiving Provider provided by Details of In Specie Assets to be Transferred or assets to be faller waters If NOT encashed NO BY TIME FUNS LETANSOD. If Property to be transferred, details Slaver Seuso + lottel of Solicitor dealing with transfer

Please note that if any assets are to be transferred In Specie, it is the responsibility of the receiving Scheme Provider to confirm that they are willing to accept the assets.

Member Declaration

I acknowledge and understand that payment of a transfer value, or a transfer of assets inspecie, or a combination of the two, from the Scheme will represent the full discharge of any liability of Alltrust Services Limited.

I also agree that any fees incurred in relation to the transfer may be withdrawn from my Scheme funds prior to transfer.

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Signature STEVEN

29/06/2017. **Date**

Cash

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		· De		

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I have attached a copy of the HMRC Registration Certificate or Approval Letter for the Receiving Scheme.

Signature	Date Position	
Company Name		

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Your Reference:	Contact Number:		
	Date:		

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From:

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Account Name	Millstone Construction Pension Scheme		

To:

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4	Sort Code	1	Amount	
	Account No	(Reference	

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Signed

Steven Howells

Stephen Dicks