

Planholder: Mr S Bratton **Plan number:** 09066290
National Insurance number: NE876163D **Date of birth:** 08-06-1965

Part 1 – Receiving scheme payment details**To be completed by the receiving scheme trustees or administrator****Receiving scheme details**

Name of receiving scheme/provider:
Our reference: (to be used on all correspondence and payments)
Please confirm either: Direct credit (preferred) or cheque details
Direct Credit details (if appropriate) Sort Code: Account number: Account payee name:
Cheque details (if appropriate) Cheque made payable to: Address: Reference to be included: (ie plan number or member/planholder name)

Policy number(s): 09066290

Part 2 – Pension transfer confirmation

(Please do not complete if an open market option is required)

1. We undertake that the receiving scheme is: (please tick one only)

- ☐ a registered defined benefit occupational pension scheme
- ☐ a registered defined occupational pension scheme
- ☐ an individual pension plan
- ☐ an unsecured pension plan

2. Receiving scheme registration number

Settlement requirement - Please provide a copy of your HM Revenue & Customs registration certificate which shows the Pension Scheme Tax Reference (PSTR).

* Delete as appropriate

Receiving scheme declaration

- (a) We declare that the information given above and overleaf is true and complete
- (b) We confirm that the transfer value will be applied to provide relevant pension benefits that are consistent with the requirements of the Finance Act 2004
- (c) Where the transfer comes from an unsecured pension plan, we confirm that the transfer will be applied accordingly to provide income withdrawals

Signature:

Company name:

Position:

Date:

Policy number(s): 09066290

Part 3 – Aegon transfer instruction

Plan number(s):	09066290
Name:	Mr S Bratton
Transfer value:	£103973.67
Date of quote:	16 October 2015

The transfer value is not guaranteed. The actual transfer value may vary from this quotation as the value of your investment could fall as well as rise before the transfer is completed. We'll calculate the actual transfer value on the second business day following the date we conclude our checks to make sure that we can send the transfer payment to the receiving scheme and are in receipt of the necessary, completed documents.

Before making any transfers, we are obliged to carry out these checks. This could result in a delay or the transfer request being declined.

Please complete the appropriate sections below.

To be completed by the planholder

I wish to transfer my benefits as follows:

Receiving scheme/insurer

- I agree that the actual value settled may be different from that quoted above due to fluctuations in my chosen investment fund, which could fall as well as rise.**
- I agree that payment of the transfer value will be a full discharge of Aegon's liability under all the plans shown above.**

Signature: SN Bratton Date

Policy number(s): 09066290

Scheme information factsheet

We can confirm that Scottish Equitable stakeholder pensions are registered under Chapter 2 of Part 4 of the Finance Act 2004. As such, they meet the CAT Standards and all of the conditions set out in section 1 of the Welfare Reform and Pensions Act 1999 (Pension scheme tax reference: 00619024RG).

We can confirm that Scottish Equitable personal pensions are registered under Chapter 2 of Part 4 of the Finance Act 2004 (Pension tax scheme reference: 00619022RA).

We can confirm that Scottish Equitable flexible personal pensions are registered under Chapter 2 of Part 4 of the Finance Act 2004 (Pension tax scheme reference: 00619022RA for non-protected rights and Pension tax scheme reference 00619022RA for former protected rights).

P860117/001124/14/15

Policy number(s): 09066290



Charges Guide – Stakeholder Policies

This is a single charge contract, which means that there is no bid / offer spread, policy fee or loyalty bonus. There is also no charge on stopping or surrendering the plan early. The basic allocation rate is 100%.

If you require any further information about this, please contact our Customer Services Department.

P860117/001124/15/15

Policy number(s): 09066290

Aegon is a brand name of Scottish Equitable plc (No. SC144517) and Aegon Investment Solutions Ltd (No. SC394519) registered in Scotland, registered office: Edinburgh Park, Edinburgh, EH12 9SE. Both are Aegon companies. Scottish Equitable plc is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Aegon Investment Solutions Ltd is authorised and regulated by the Financial Conduct Authority. Their Financial Services Register numbers are 165548 and 543123 respectively.

We're proud to be the Lead Partner of British Tennis.



FriendsLife

Friends Life Limited
PO Box 1550, Milford, Salisbury, SP1 2TW
Telephone 0845 6029221 Fax 08456000624

Emily Hughes
Wealthmaster Financial Management Ltd
1 Charnwood Park
Waterton Bridgend
Mid Glamorgan
CF31 3PL

18 November 2015

Dear Sir / Madam

Scheme/member number F46043/14613
Member name Mrs Julie Anne Bratton
Scheme name Registered Stakeholder [FOR POST OCT/2009 LEAVERS ONLY]

Thank you for your recent enquiry. Here is the information you have asked for.

I hope you find this information helpful. If you have any questions about this letter, please give us a call on the help line number mentioned above. We will be happy to help.

Yours sincerely

Jane Baynes

Client Services

Friends Life is a business name of certain companies in the Friends Life group including the following companies:
Friends Life Limited Company number 4096141. Friends Life and Pensions Limited Company number 475201
Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.
Friends Life Marketing Limited Company number 5059179. Friends Life Investment Solutions Limited Company number 6389025
Authorised and regulated by the Financial Conduct Authority.
All are incorporated companies limited by shares and Registered in England and Wales. Registered Office Pixham End, Dorking, Surrey, RH4 1QA.
Calls may be recorded. Friends Life is a registered trade mark of the Friends Life group. www.friendslife.com





TRANSFER VALUE QUOTATION AT 17/11/2015

Prepared for:

Scheme: Registered Stakeholder [FOR POST OCT/2009 LEAVERS ONLY]
Name: Mrs Julie Anne Bratton
Date of birth: 17/08/1963
Date of joining scheme: 01/05/2005
Date of leaving scheme: 18/11/2015
Normal retirement date: 17/08/2018
Scheme reference: F46043/14613

Details of Transferring Scheme:

Scheme name: Friends Life [No.3] Stakeholder Pension Scheme
Approval basis of scheme: Approved under Chapter II of Part IV of the Finance Act 2004.
PSTR reference number: 00613697RN

Current fund value:

Value of the plan at 17/11/2015 is £46980.05

Current transfer value:

Transfer value of the plan at 17/11/2015 is £46980.05

Split -

Regular/Single Premium contributions £46980.05



Receiving Scheme Information:

- The transfer value can only be paid to another UK registered pension scheme and subject to HMRC requirements.
- The amount quoted above does not include any benefits arising from a divorce/dissolved civil partnership and no earmarking order/attachment is held in respect of these benefits unless the scheme reference number is F46036/F46037.
- None of the benefits are in drawdown providing an unsecured pension or Alternatively Secured Pension.
- None of the transfer directly or indirectly arise from uncrystallised rights under an approved occupational pension scheme or buyout contract where on or after 27 July 2004 but before 6 April 2006 the member had elected to take a tax-free lump sum while deferring receipt of the pension.

Important Information:

- The transfer value is not guaranteed. The amount actually payable will depend on the value of your investments on the date we process the transfer. It may be higher or lower than the amount shown above.
- This information assumes that any contributions submitted to us in the last 14 days will be cleared by the bank. In the unlikely event that this does not happen the value shown will reduce.
- Please note that any Tax-Free Cash Sum entitlement above 25% will be lost if you decide to transfer out unless it forms part of a block transfer. If the transfer is part of a block transfer please contact us for additional information.
- In the event that a special early retirement age is shown if further information is required please contact us on the number above.
- The policyholder does not have the right to take benefits before age 55.
- The status of this transfer relating to primary/enhanced protection is unknown.
- The right is reserved to correct any error which may be contained in this quotation before any transfer value is paid.
- We recommend that you seek financial advice.

FriendsLife

Friends Life Limited
PO Box 1550, Milford, Salisbury, SP1 2TW
Telephone 0845 6029221 Fax 08456000624

Emily Hughes
Wealthmaster Financial Management Ltd
1 Charnwood Park
Waterton Bridgend
Mid Glamorgan
CF31 3PL

18 November 2015

Dear Sir / Madam

Scheme/member number F46043/14613
Member name Mrs Julie Anne Bratton
Scheme name Registered Stakeholder [FOR POST OCT/2009 LEAVERS ONLY]

Thank you for your recent enquiry. Here is the information you have asked for.

I hope you find this information helpful. If you have any questions about this letter, please give us a call on the help line number mentioned above. We will be happy to help.

Yours sincerely

Jane Baynes

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All are incorporated companies limited by shares and Registered in England and Wales. Registered Office Pixham End, Dorking, Surrey, RH4 1QA.
Calls may be recorded. Friends Life is a registered trade mark of the Friends Life group. www.friendslife.com





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Date of leaving scheme: 18/11/2015
Normal retirement date: 17/08/2018
Scheme reference: F46043/14613

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PSTR reference number: 00613697RN

Current fund value:

Value of the plan at 17/11/2015 is £46980.05

Current transfer value:

Transfer value of the plan at 17/11/2015 is £46980.05

Split -

Regular/Single Premium contributions £46980.05



Receiving Scheme Information:

- The transfer value can only be paid to another UK registered pension scheme and subject to HMRC requirements.
- The amount quoted above does not include any benefits arising from a divorce/dissolved civil partnership and no earmarking order/attachment is held in respect of these benefits unless the scheme reference number is F46036/F46037.
- None of the benefits are in drawdown providing an unsecured pension or Alternatively Secured Pension.
- None of the transfer directly or indirectly arise from uncrystallised rights under an approved occupational pension scheme or buyout contract where on or after 27 July 2004 but before 6 April 2006 the member had elected to take a tax-free lump sum while deferring receipt of the pension.

Important Information:

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- This information assumes that any contributions submitted to us in the last 14 days will be cleared by the bank. In the unlikely event that this does not happen the value shown will reduce.
- Please note that any Tax-Free Cash Sum entitlement above 25% will be lost if you decide to transfer out unless it forms part of a block transfer. If the transfer is part of a block transfer please contact us for additional information.
- In the event that a special early retirement age is shown if further information is required please contact us on the number above.
- The policyholder does not have the right to take benefits before age 55.
- The status of this transfer relating to primary/enhanced protection is unknown.
- The right is reserved to correct any error which may be contained in this quotation before any transfer value is paid.
- We recommend that you seek financial advice.

Friends Life Limited
PO Box 1550, Milford, Salisbury, SP1 2TW
Telephone 0845 6029221 Fax 0845 6000624

Transfer Out Authority Form

Registered Stakeholder [FOR POST OCT/2009 LEAVERS ONLY]

Details of member: Mrs Julie Anne Bratton

Member reference: F46043/14613

National Insurance number:

Date of birth: 17/08/1963

This Transfer-Out Authority form should only be used in respect of a transfer to a UK registered pension scheme [this includes transfers to a deferred annuity contract, i.e.: 'Section 32 Buy-Out policy'].

Section 1 - Details about the new [receiving] scheme [To be completed by the receiving scheme or insurance company or we can accept this information in the receiving scheme or insurance company's format]

A] Full name of receiving scheme [enter member's name where the transfer is to a deferred annuity contract]:

The above pension scheme has been registered by HM Revenue & Customs, or has acquired registered status by virtue of being a deferred annuity contract or an approved pension scheme on 5 April 2006, under Chapter 2 Part 4 of the Finance Act 2004.

B] Is the registered pension scheme fully insured? **YES / NO**

C] HMRC approval number of the receiving scheme: **SF** _____

Or

HMRC Pension Scheme Tax Reference number: **PSTR** _____

[Note: The above approval numbers are not required where the transfer is to a deferred annuity contract]

D] Is the registered pension scheme permitted to receive this transfer value, and will it meet the minimum acceptance requirements?

YES / NO

E] How is the transfer to be paid?

[Please tick appropriate box]

☐ Electronic funds transfer

[Please complete Section F]

☐ Cheque

[Please complete Section G]

Friends Life Limited
PO Box 1550, Milford, Salisbury, SP1 2TW
Telephone 0845 6029221 Fax 0845 6000624

Transfer Out Authority Form

Registered Stakeholder [FOR POST OCT/2009 LEAVERS ONLY]

Details of member: Mrs Julie Anne Bratton

Member reference: F46043/14613

National Insurance number:

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A] Full name of receiving scheme [enter member's name where the transfer is to a deferred annuity contract]:

The above pension scheme has been registered by HM Revenue & Customs, or has acquired registered status by virtue of being a deferred annuity contract or an approved pension scheme on 5 April 2006, under Chapter 2 Part 4 of the Finance Act 2004.

B] Is the registered pension scheme fully insured? **YES / NO**

C] HMRC approval number of the receiving scheme: **SF** _____

Or

HMRC Pension Scheme Tax Reference number: **PSTR** _____

[Note: The above approval numbers are not required where the transfer is to a deferred annuity contract]

D] Is the registered pension scheme permitted to receive this transfer value, and will it meet the minimum acceptance requirements?

YES / NO

E] How is the transfer to be paid?

[Please tick appropriate box]

☐ Electronic funds transfer

[Please complete Section F]

☐ Cheque

[Please complete Section G]

F] Bank account number: _____

Account name: _____

Sort code: _____

Payment reference: _____

[If this is not provided we will send the payment quoting the member's name, NI No and your policy reference, if known]

G] Make the transfer value cheque

payable to: [See note below] _____

Address to send cheque to: _____

Reference / Contact Name: _____

Notes

Where the registered pension scheme is fully insured, Friends Life will only make payment to the receiving Insurance Company. If the scheme is not fully insured, payment will be made to the trustees.

We confirm that the details provided are correct and we are willing to accept the transfer.

Signature: _____

Date: _____

Print name: _____

Title: _____

Section 2 - Members Declaration [to be completed by the member or we may be able to accept the receiving scheme or insurance company's application form as member's authority]

I hereby instruct Friends Life to make the transfer payment detailed above and understand that continued membership of the scheme, or rejoining the scheme, is not permitted once the transfer has been made. As such I accept that no further contributions can be made and I confirm that the information given is correct. I understand that once I have transferred out of my current scheme, my membership of that scheme finishes and I will lose all benefits in that scheme, including any death benefits and dependants' pensions.

Member's signature:  _____

Date: _____

Print name: JULIE BRATTON

AEGON SCOTTISH EQUITABLE
RETIREMENT CONTROL: EXTERNAL PENSION TRANSFER INSTRUCTION
Transfer from Unsecured Pension/Income Drawdown Plan (Member Only)

PART 1 – TRANSFER DETAILS (TO BE COMPLETED BY THE POLICYHOLDER)

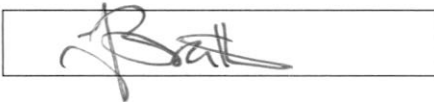
Name of policyholder	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>	<input type="text"/>	
Policy Number(s)	<input type="text"/>		
*Illustrated Transfer Value	<input type="text"/>	Non Protected Rights (insured)	
	<input type="text"/>	Protected Rights	
	<input type="text"/>	Self Invested value (if applicable)	

*This transfer value is not guaranteed. The actual transfer value may be different. It will be the transfer value calculated when the transfer is made. This will be after all the completed documentation has been received in AEGON Scottish Equitable's Head Office or the date the self-administered assets are received from Capita SIP Services if part 3(II) or part 3(III) is chosen.

Number of arrangements to be transferred

PART 2 – FORM OF AUTHORITY (TO BE COMPLETED BY THE POLICYHOLDER)

Please pay the total transfer value to:

Name of Insurance Company/Scheme	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>	<input type="text"/>	
Signed		Date	<input type="text"/>

Part 3 – PAYMENT DETAILS (TO BE COMPLETED BY THE RECEIVING SCHEME)

To AEGON Scottish Equitable plc (Life & Pensions)

Name of Member	<input type="text"/>
Name of Receiving Scheme/Insurer	<input type="text"/>

We confirm that we are willing to accept the proposed transfer and that the scheme/policy rules permit their application. The receiving scheme/policy is a personal pension scheme

of which the policyholder referred to in Part 1 is a member and which is registered under Chapter 2 of Part 4 of the Finance Act 2004.

ASCN No.

--

We further confirm that the arrangements under the receiving scheme to which the transfer will be applied meet the appropriate HM Revenue & Customs requirements of the Finance Act 2004. The member has elected under the new arrangements made in accordance with the receiving scheme to defer the purchase of an annuity and to make income withdrawals which will take effect simultaneously with the transfer payment.

Bank Details of Receiving Insurer:

Name of Account:

--

Branch Sort Code:

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

Bank or Building Society Account Number:

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

Building Society Roll Number (if applicable):

--

Name and Address of Receiving Life Office's Bank or Building Society:

--

For and on behalf of the Receiving Insurer, signed by (*Authorised Official*):

Name and Position:

Date:

FORMAL APPLICATION TO TRANSFER
(to be completed by the transferring member)

To: The Trustee of the Sumitomo Electric Wiring Systems (Europe) Pension Scheme ("the scheme")

I request the Trustee to use the value of my benefits accrued in the scheme for acquiring benefits in the receiving scheme named below.

Main scheme transfer value	: £256,259.00
Guaranteed for a period of 3 months from	: 14 April 2015
Plus	
Estimated DC Fund transfer value	: £0.00 (not guaranteed)

This transfer should be treated as the exercise by me of my right to a cash equivalent under the Pension Schemes Act 1993, Part IV, Chapter IV if I am entitled to that statutory right.

I understand that

- the total transfer value payment represents the cash equivalent of all benefits otherwise payable from the scheme to me and my dependants including rights obtained as a result of being contracted out of the Additional State Pension (formerly SERPS and the State Second Pension)
- the benefits provided in the receiving scheme may be different in form and amount to those that would have been provided by the and that, if the receiving scheme is not contracted out of the Additional State Pension, there is no legal requirement for the receiving scheme to provide for dependants' benefits from the transfer payment
- The amount of the DC Fund transfer value paid (if applicable) will reflect the surrender value of my investments when they are sold and may be higher than the amount shown

I confirm and/or acknowledge that

- my decision to transfer is not as a result of any advice given to me either by the Trustee of the scheme or by Punter Southall
- the Trustee and Punter Southall have recommended that I seek independent financial advice before deciding to transfer
- I have been made aware of the risks and consequences of pension liberation fraud and pension scams and the warning signs to look out for. In particular, I understand that if, following the transfer of my benefits, I am able to access my pension savings before age 55 or take a loan or cash advance from my pension savings, then this is likely to be seen by HMRC as pension liberation and I could incur substantial tax charges and HMRC fines
- I have received a statement from the receiving scheme detailing the benefits to be provided in exchange for the transfer payment
- I understand that payment of the transfer value will extinguish all of my rights under the scheme and that once payment is made neither I nor my dependants will have any further entitlement or claim in respect of benefits under the scheme
- I understand fully that I am responsible for the tax, legal and benefit implications during and subsequent to the transfer of my benefits - in particular, I am aware of the charges and investments that will apply and all potential tax implications
- (Only applicable if the receiving scheme is an occupational pension scheme) I am employed by the sponsoring employer

Continued\....

I understand that, after the transfer is made, I shall have no more rights under the scheme.

Receiving scheme name (in full*) _____

I have taken independent financial advice about this transfer

YES / NO

(Where the transfer value of your safeguarded benefits is more than £30,000 we also require the completed Appropriate Independent Advice Confirmation Form before payment)

Signed

 _____

Date _____

Member's name

* If this does not exactly match the scheme name shown on the Receiving Scheme Undertaking, we will not be able to process your transfer application

Please return this form to Punter Southall Limited, 1 Colmore Row, Birmingham, B3 2BJ

RECEIVING SCHEME UNDERTAKING

(To be completed by or on behalf of the Scheme Administrator of the Receiving Scheme)

Name of the Transferring Scheme: Sumitomo Electric Wiring Systems (Europe) Pension Scheme

Member's Name: Julie Bratton

Member's National Insurance Number: NA896521D

Full name of the Receiving Scheme:

**Pension Scheme Tax Reference
(PSTR number):**

Date registered with HMRC:

Name of Scheme Administrator:

(Please note: This is the "Scheme Administrator" within the meaning of Chapter 7 Part 4 of the Finance Act 2004, as detailed on the HMRC Registration confirmation (see below); not the firm who provides administration services for the scheme)

Please attach:

- a copy of the HMRC registration letter or, if approved prior to 6 April 2006, the approval letter and screen print from Pension Schemes Online confirming the PSTR number and Scheme Administrator.

- a print of the "Current Scheme Details" page from Pensions Schemes Online confirming the scheme's current status and the Scheme Administrator (printed in the last 30 days)

What type of benefits will the transfer value provide in the Receiving Scheme? (Please tick one)

Flexible benefits

☐

Safeguarded benefits

☐

('Flexible benefits' and 'safeguarded benefits' are defined in the Pension Schemes Act 2015)

What type of scheme is the Receiving Scheme? (Please tick one)

Occupational Pension Scheme

☐

Fully-insured Scheme

☐

Personal Pension Scheme (including
a Stakeholder Plan)

☐

Deferred Annuity Contract

☐

Self Invested Personal Pension
(SIPP)

☐

Statutory Scheme

☐

Small Self-Administered Scheme
(SSAS)

☐

If Receiving Scheme is an occupational pension scheme or SSAS:

Full name of sponsoring employer:

Registered address:

Companies House number:

Date member was employed by the sponsoring employer:

If Receiving Scheme is a Personal Pension Scheme or SIPP

Full name of Personal Pension provider / SIPP operator:

FCA Financial Services Register registration number:

(sometimes known as a Firm Reference Number (FRN))

(Please note - the registration number must be provided. The transfer value will not be paid until we have verified the status of the Personal Pension provider / SIPP operator on the FCA Financial Services Register)

Contracting-out details

Is the Receiving Scheme contracted out? Yes / No *(delete as applicable)*

If Yes, ECON:

SCON:

Date contracted-out
employment commenced:

GMP revaluation
rate:

Fixed rate / Section 148 Orders
(delete as applicable)

Declaration on behalf of Scheme Administrator

I confirm that

(Please tick boxes 1,2 and either 3a or 3b)

1. the Receiving Scheme is a registered pension scheme within the meaning of Chapter 2 of Part 4 of the Finance Act 2004 and is capable of receiving the transfer in respect of the Member. ☐
2. the Receiving Scheme operates and will continue to operate so as to meet all HMRC conditions to be a Registered Pension Scheme and has not been excluded from being a Registered Pension Scheme by HMRC. ☐
3. a) I am the Scheme Administrator of the Receiving Scheme within the meaning of Chapter 7 of Part 4 of the Finance Act 2004. ☐

OR

- b) I am authorised to sign on behalf of the Scheme Administrator named above ☐

I declare that the Receiving Scheme is authorised and willing to accept the transfer payment and that it will be used to provide authorised benefits within the Receiving Scheme.

I further declare that all of the information above is accurate and complete and will be used for the purpose of making a recognised transfer under section 169(1)(a) of the Finance Act 2004. I understand that the provision of any false information or declaration could result in tax consequences for which the trustee of the Transferring Scheme will not be liable.

On behalf of the Scheme Administrator of the Receiving Scheme, I hereby consent to Punter Southall obtaining such information as required from HMRC, including the tax-registered status of the Receiving Scheme, in connection with the proposed transfer.

I acknowledge that if the details provided on this document are incomplete or incorrect the transfer will not be processed until an acceptable document has been received by Punter Southall.

Signed by or on behalf of the Scheme Administrator of the Receiving Scheme:

Signature:

Date:

Full name and position if signing on behalf of the Scheme Administrator:

Payment details

1. We will only make payment directly to the receiving scheme, not via a third party or to an intermediary's client account.
2. For fully-insured schemes, the payee must be the receiving life office.
3. **For SIPP:** If you want us to make the transfer payment to a trustee company, rather than to the SIPP operator or Scheme Administrator, please also provide the FCA registration number of the trustee company (if authorised and regulated by the FCA). If the trustee company is a 'bare trustee' and not required to be registered with the FCA, we require a copy extract from the establishing trust deed confirming the connection with the SIPP, the full name of the trustee company and Companies House no.
4. For all other types of receiving scheme, the payee must be the Scheme Administrator, the scheme name or the Trustees of the (Receiving Scheme name).
5. If you require payment by cheque, please tell us the payee name and address you want us to send the cheque to in your covering letter.

Account details for bank transfer

Account name:

Bank name:

Account number:

Sort code:

Reference (for identification purposes):

Please give any other contact names / references that will reduce the chance of the payment being misdirected.

Please return the completed form, quoting our reference on the covering letter to Punter Southall Limited, 1 Colmore Row, Birmingham, B3 2BJ

APPROPRIATE INDEPENDENT ADVICE CONFIRMATION

(to be completed by the financial adviser giving advice to the member on the transfer)

Name of the Transferring Scheme: Sumitomo Electric Wiring Systems (Europe) Pension Scheme

Member's Name: Julie Bratton ('the Member')

Member's National Insurance Number: NA896521D

Safeguarded Benefit details

Transfer value available from the scheme : £256,259.00

Guaranteed for a period of 3 months from : 14 April 2015

Financial Adviser Details

Full Name of Adviser:

Name and Address of Adviser's Firm ('the Firm') (and Network if Appointed Representative)

FCA Registration Number/ Firm Reference Number (FRN):

Declaration

I confirm that

(Please tick boxes)

1. As an adviser of the Firm named above, both the Firm and myself are authorised to advise on the transfer of safeguarded benefits by the FCA. This is reflected on the FCA Financial Services Register under the regulated activity of advising on pension transfers, conversions and opt-outs. ☐
2. I have given advice to the Member named above on ____/____/____ (insert date) in relation to a transfer of safeguarded benefits to a flexible benefits arrangement. ☐

Signature:

Date:

This form must be returned by 14 July 2015 to Punter Southall Limited, 1 Colmore Row, Birmingham, B3 2BJ