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One Southampton Row

WC1B 5HA Date: Dear Team, Account Number: 18285444 Please accept this letter as my request to close the above account with immediate effect. Please arrange to transfer any remaining balance to the follow account. Account Name: SPM SSAS Account Number: Sort Code: Payment Ref: SPM SSAS **Leslie Buckley** Mary Buckley Paul Buckley **Anne King** We hereby give our consent to the closure of the above account and a transfer out of the closing balance as requested above. Authorised Signatory - Pension Practitioner. Com Limited