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CARLTON JAMES

Carlton James Private & Commercial Unit 4: Clearwater Business Park, Frankland Road, Swindon, 5N6-81

+44 (0) 800 233 5526 F +44 (0) 1793 886 444 E info@private-commercial.com W www.private-commercial.com



Mr Richard Sollis New barn House,4 The Olympia Ogbourne St. Andrew Marlborough, Wiltshire SN8 1XF

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Date of this letter 24 March 2014

Plan number

4004234828

Planholder

Richard Sollis

0845 603 3419

Open weekdays 8:00am-6:00pm

0130 687 9055

PO Box 1810, Bristol, BS99 5SN

www.friendslife.co.uk/customer

Transfer of pension benefits

Dear Mr Sollis

Thank you for your enquiry. Please find enclosed your transfer quote.

Before transferring these benefits you should consider whether this is the right choice. Please read the following pages which set out some of the things that should be taken into account before transferring. For example, if the policy contains a guaranteed annuity rate or protected tax free cash which would be lost on transfer, then this will be mentioned in the section entitled 'Transferring your pension plan? - Things to think about'. Please read this section carefully for any special considerations that apply to this specific policy.

If you do not understand any terms referred to in the document, further information can be obtained by calling our Customer Contact Centre.

Your policy may contain additional benefits which may be lost on transfer. We suggest that you obtain financial advice before any transfer.

We are unable to give financial advice, but we are happy to help with any queries you may have. If you would like advice, please contact your financial adviser. The financial adviser for this plan is JW FINANCIAL PLANNING LTD who can be contacted on 01625500036.

Transfer value as at 24 March 2014

| Plan number | Fund value | AMC adjustment | Transfer value |
|-------------|------------|----------------|----------------|
| 4004234828 | £10,297.32 | -£1.41 | £10,295,91 |

The above figures are not guaranteed, and will be recalculated before the payment is made.

An annual management charge (AMC) adjustment applies to this plan, as shown above. This is the monthly AMC due up until the quotation date of 24 March 2014.

In order to proceed with the transfer, the following forms must be completed and returned to us:

- Discharge form;
- · Transfer questionnaire and declaration form;

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This pack is designed to help with the transfer to a UK registered pension scheme. If you would like to transfer to an overseas pension scheme, please call us for the appropriate documentation.

The enclosed document checklist will help to ensure the correct forms required are completed, to avoid delays in payment.

We will only be able to process this transfer once we have received the correctly completed documents.

The enclosed documents, titled "Information for the receiving pension scheme" and "Transfer questionnaire and declaration", are required by the pension scheme to which the funds are to be transferred. Please send the documents to them so they can complete and return the "Transfer questionnaire and declaration" to us.

The transfer documentation enclosed cannot be used to move funds under the open market option. If you are able to take retirement benefits, and you wish to exercise the open market option, please contact us and we will issue the appropriate documentation.

What will happen next

The receiving scheme must ensure that they have all the information they require for the transfer to proceed. The information the receiving scheme requires, and the time taken for them to process the transfer request, will vary between schemes. When their requirements have been met, the receiving scheme will contact us to start the transfer process. When the receiving scheme has given us all the information we require, we will make payment directly to them, usually within 10 to 15 working days. We will write to tell you when we have made the transfer payment.

If we do not hear from you

Until we hear from you or the receiving scheme the current plan will continue and we will assume that you do not wish to transfer at this time. However, please note that Her Majesty's Revenue & Customs require that the information and documentation for transfers to an overseas pension scheme are returned to the current provider within 60 days of the original request.

If you have any questions about the requirements for an overseas transfer to a QROPS please refer to www.hmrc.gov.uk/pensionschemes.

I hope that this information is useful. If you need any more information or have further questions, please contact us and we will be happy to help. So that we can deal with your queries quickly and efficiently, please quote the reference shown at the top of this letter.

If you change your email or postal address, landline or mobile number, please let us know so that we can update our records to keep in contact with you.

Yours sincerely.

Richard Crouch Operations Director

These documents are available in other formats.

If you would like a Braille, large print or audio version of this document, please contact us.



Transfer questionnaire and declaration form

Warning - Failure to fully complete this form will delay payment.

Section 1 - Details of transferring scheme/planholder

| Scheme type | Stakeholder |
|--------------------------|-------------------|
| Planholder name | Mr Richard Sollis |
| Planholder date of birth | 18 December 1958 |
| Planholder NI number | WE302357A |
| Plan number | 4004234828 |

Section 2 - Details of receiving scheme

| Scheme name | |
|--|------|
| Receiving scheme policy number | |
| Scheme's HMRC registration or | 1972 |
| tax approval reference | |
| Scheme administrators name | |
| Scheme administrators address | |
| Postcode | |
| Name of contact (in case of enquiry) | |
| Telephone number | |
| Type of scheme - the scheme is a: (Please tick the one relevant box) | |
| A) A pension scheme registered under Chapter 2, part 4 of the Finance Act 2004 | |
| B) A Statutory Scheme (as defined in Chapter 1, part 4 of the Finance Act 2004). | |
| If you have ticked option A please enclose a copy of the scheme's HMRC registration do scheme was registered from 6th April 2006 this will be the scheme's original approval | |

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Planholder's declaration

Please read this declaration carefully before signing it. If you believe one or more of the statements are not true in relation to the proposed transfer, and as a result you cannot sign the declaration, the transfer cannot proceed.

In relation to the plan listed above, I hereby declare:

- I agree to, and request, the transfer of benefits as indicated above.
- I understand the transfer value is not guaranteed. It will be recalculated before the payment is made, and may
 be higher or lower than the amount shown above.
- I am the legal owner of the plan and I am legally entitled to instruct Friends Life to transfer the value. I have never been adjudged to be bankrupt and there are no court orders affecting my plan.
- I agree to the amendment of my plan, where required, to permit the transfer of benefits requested.
- I understand and agree that payment of the transfer value will be in full and final discharge of Friends Life's liabilities in respect of the benefits under the plan number stated above.

My National Insurance number is WE302357A.

I understand that if I have any entitlement under the Friends Life plan to a protected tax-free lump sum and/or a protected pension age these may be lost upon transfer.

| Planholder's signature | |
|-------------------------|--|
| Name RICHARD PAUL SOLUS | |
| Date | |

Please remember: We will cancel the units and calculate the transfer value using the unit prices at the next valuation date following receipt of all the items requested, fully completed, together with any supporting documents. The amount transferred may be higher or lower than the figures shown above.

Any incomplete or missing information will delay both the cancellation of units and the transfer payment to the receiving scheme.

Before signing, if you are unsure of any of the terms we have used, help is available by calling our Customer Contact Centre.

Please note, if the new agreement is cancelled with the scheme indicated above, Friends Life may not be able to accept the transferred money back in to your original contract.

Transfer questionnaire and declaration form continued

Page 2 of 3

| Additional details | | |
|--|---------------------------------------|-------------------------|
| Is the scheme | | |
| (i) A non-insured self-administered scheme or a Self Invested Pension Plan? | Yes | No |
| (ii) An insured scheme? | Yes | No [|
| (iii) A public service pension scheme as defined in s150(3) FA2004? | Yes | No |
| (iv) A buy-out (deferred annuity) contract? | Yes | No |
| If the scheme is an insured scheme, or a buy-out contract, we will usually make payr office insuring the scheme or contract. | nent only to the | e life |
| Section 3 - Payment details | | |
| Please note that if your scheme is fully insured then we will pay the transfer payment direct company, in accordance with HMRC requirements. If the transfer is to a non-insured scheme the receiving provider or administrator. | ctly to the new i me we will pay o | nsurance directly to |
| Our preferred method of payment is direct credit. | | |
| (a) If you would prefer payment by BACS please provide us with details of the account into payment to be made. | o which you wou | ıld like |
| Sort Code | | |
| Account number | | |
| Account name | | |
| Name of bank | | |
| Reference number | | |
| (b) If you would prefer payment by cheque, to whom should the transfer cheque be made | payable? | |
| | | |

administrator

This is the scheme/contract's:

trustees

insurer

Transfer questionnaire and declaration form continued

| (c) Where should the cheque be sent (complete if different from above)? | | | |
|---|--|--|--|
| Name | | | |
| Address | | | |
| Postcode | | | |

Section 4 - Receiving scheme declaration

This section is NOT to be completed by the planholder.

We hereby declare:

We are willing to accept the transfer payment;

The transfer payment will be used to provide relevant benefits under a UK registered pension scheme, in line with Part 4 of the Finance Act 2004;

The information given in this questionnaire is complete and correct; and we consent to Friends Life referring this proposed transfer to the Revenue and for the Revenue to provide information to Friends Life relating to the registration of the receiving scheme.

Signed for and on behalf of the receiving scheme:

Please note: Friends Life may not accept the return of the payment.





Data Protection Act 1998:

How we use the information you provide

The personal data you have provided to us will be treated as confidential and held in our data systems to provide the product or service for which you have applied, and may also be used for the:

- prevention of crime, fraud and money laundering;
- · purposes of identity verification via electronic reference agencies, who may keep a record of the data; and
- marketing of further products, which may be of interest to you, by the Friends Life Group and its companies ('the Friends Life Group') or carefully selected third parties by telephone, post or other electronic means.

Your personal data will only be disclosed to other members of the Friends Life Group, its agents and their subcontractors, or selected third parties, where there is a legitimate reason to do so.

Your personal data may be processed in countries outside the European Economic Area. This processing will be carried out by experienced and reputable organisations and only on terms which safeguard the security of your data and meet the requirements of the Data Protection Act 1998.

A full copy of our data protection statement can be obtained from our Customer Contact Centre.

If you would prefer not to be contacted in connection with the marketing of further products and services, and have not already expressed this preference, please get in touch with us at:

Address: Friends Life, PO Box 1810, Bristol, BS99 5SN

Phone: call our UK-based Customer Contact Centre on 0845 603 3419 between 8.00am and 6.00pm, Monday to Friday. Call charges may vary, please speak to your network provider for details.

E-mail: alternatively, you can go to the 'Contact us' section of our website at www.friendslife.co.uk/customer

Finally, if the information we have about you is correct and up to date, we can provide a better service. You can help by let...

Tantibus (N.)



Information for the receiving pension scheme

Existing arrangement details

| Plan holder name | Mr Richard Sollis | |
|------------------|-------------------|--|
| Plan number | 4004234828 | |
| Contact address | PO Box 1810 | |
| | Bristol | |
| | BS99 5SN | |

The scheme is, or is deemed to be, a registered pension scheme in accordance with Part 4 of the Finance Act 2004.

IR reference or HMRC PSTR 00613693RB

Transfer value as at 24 March 2014

| Accumulation funds | £10,295.91 | _ |
|----------------------|------------|---|
| Total transfer value | £10,295.91 | _ |

The above figures are not guaranteed, and will be recalculated before the payment is made.

Additional transfer details

| Are any rights resulting from a pension share included? | No |
|--|----|
| Are drawdown pension funds included? | No |
| Has any tax-free lump sum been paid in connection with the rights being transferred? | No |
| Are any of the rights being transferred subject to a pension earmarking or attachment order? | No |



Important information

Transferring your pension plan? - Things to think about

Getting advice

Transferring your pension benefits to another provider can be a major decision to make, so we strongly recommend you consult your financial adviser when considering your options.

We are unable to give financial advice, but we are happy to help with any queries you may have. If you would like advice, please contact your financial adviser. The financial adviser for this plan is JW FINANCIAL PLANNING LTD who can be contacted on 01625500036.

Things to think about before transferring your plan

Transferring your pension is a big step, so we have highlighted a few things you may wish to consider before you finally commit to transferring. In particular please make sure you understand:

The cost of transferring - the transfer value offered may not buy the same level of benefits with a new provider. The new provider may also make up-front charges.

If you need any further information on these benefits, please call us using the contact details in our covering letter.



Friends Life Transfer document checklist

Please ensure all forms have been fully and accurately completed, and all of the documents listed below are sent to us or the receiving scheme as indicated.

| Document title | Instructions | / |
|---|--|---|
| Transfer discharge form | Fully complete the name and address of the pension provider receiving the transfer payment. This must be fully completed and signed by the planholder | |
| Transfer questionnaire and declaration form | This must be fully completed and signed by an authorised representative of the receiving pension scheme. | 1 |

We will only be able to process this transfer once we have received the correctly completed documents.

Please return your completed forms and documents to:

Friends Life

PO Box 1810 Bristol

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Transfer discharge form

To be completed by the planholder.

| Plan number | 4004234828 |
|---|--|
| Planholder | Richard Sollis |
| authorise Friends Life to transfer the | e sum of £10,295.91 (not guaranteed) to: |
| Enter the full name and address of to payment. | he pension provider or pension scheme which is to receive the transfer |
| Provider/scheme name | |
| Provider/scheme address | |
| | Postcode |
| Contact name | |
| Contact telephone number | ik oni- |
| Contact fax number | |
| Please provide a telephone number l 6.00pm, Monday to Friday Preferred daytime contact number | below which we can use to contact you between the hours of 8.00am and |
| If your financial adviser is acting o | n your behalf please tick the box |
| My financial adviser is dealing instructions. | g with my pension transfer on my behalf, I authorise you to act upon their |
| Financial adviser's name | |
| Financial adviser's firm | |
| Financial adviser's contact number | |
| Special Instructions | |
| If you would like to request a partial | transfer please provide details in the box below. |

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National Australia Group DC Pension Scheme

Transfer-out request

Name of the member:

Mr RP Sollis

Reference number:

0003475

I am thinking about transferring my deferred benefits in the Scheme to another registered pension plan. I authorise Towers Watson Limited to provide all relevant information to the organisation named below.

| Please use BLOCK CAPITALS | |
|---------------------------------------|--|
| Name of organisation: | |
| Reference number: | |
| Address and post code: | |
| | |
| | |
| | |
| Signed: | Date: |
| Print your name: RICHALD Anu | |
| Please return your filled-in form to: | Towers Watson Limited PO Box 545 Redhill RH1 1YX |

Production date: 28 June 2012 NAG/0003475/2060610/5.04