

REF: FUTTERED & GNOWERISC SCHOMES/SALYMILINE TRANSPOR DERLARATION

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RISASE FIND ATTACHED THE NOW PAGE AS DISCUSSED with compliments

DEAR GMILY,

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Stratford Collins Limited, PO Box 71, Vale of Glamorgan, CF71 9BB Tel: 07770 750994 E-mail: info@stratfordcollins.co.uk

Registered in England and Wales No. 5951675. Registered Office: 3 Frampton Lane. Llantwir Major. Vale of Glamorgan, CF61 2UZ Stratford Collins Financial Consultants Limited is Authorised and Regulated by the Financial Services Authority.

Part B – Transfer instruction (occupational pension schemes)

4.1	Member's personal details	
	Please enter the member's details	
	Title Mr / Mrs / Miss / Ms / Other — please specify	Date of birth (dd/mm/yyyy)
	Full forename(s)	National Insurance number
	Surname	Plan number (the 'plan')
5.	Transfer details	
	We want you to pay the transfer value for the member to:	Address
	Receiving insurer name	
		Postcode
	Reference	If the receiving scheme is a qualifying recognised overseas pensions scheme, we'll provide you with an additional form to complete.
6.	Declaration	
	In this declaration 'we' means the scheme trustees and 'you' means Aegon (a brand name of Scottish Equitable plc).	Date (dd/mm/yyyy)
5.1	We request that you pay the transfer value	Scheme trustees (print names)
5.2	of the policy to the receiving scheme.	SALLY MILLINER.
J. Z	We confirm that this payment represents a full discharge of your liabilities under the policy.	Scheme trustees (signatures)
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