

**Benefit Crystallisation Event  
Member Questionnaire**

**Scheme Name:** A B & A Pension Fund  
**Member Name:** Sir Aubrey Brocklebank  
**Date of Birth:** 29/01/1952  
**NI Number:** YY690315D

Please accept this as my written request to take benefits from the above scheme and confirmation of information in respect of this Benefit Crystallisation Event:

**Required Benefits**

1. I wish to vest sufficient funds to provide a Tax Free Cash amount of £30,000
2. ~~I wish to vest sufficient funds to provide an annual income amount of £~~

**Valuation of your share of fund at the time of crystallization:** TBC

Will this be your first Benefit Crystallisation Event occurring on or after 06 April 2006 (under any Registered Pension Scheme)?

Yes

~~No~~

If 'No', what was the date of your first Benefit Crystallisation Event occurring on or after 06 April 2006

Date:

~~18/01/2021~~

What is the percentage of the SLA used up under those earlier Benefit Crystallisation Events that occurred under any other Registered Pension Scheme you are (or were) a member of, as recorded on your latest scheme statement(s). Copy statement(s) **MUST** be attached.

**Name of Registered Pension Scheme:**

% SLA

Member Signed:



Date:

18/01/2021

# Outward Payment Instruction (Faster Payments & CHAPs)



Allied Irish Bank (GB)

V.A.M.

Registered Scheme Administrator

## 1. Customer details

Customer Name

A B & A Pension Fund

Account Number

0 4 9 1 9 0 8 8

## 2. Payment details

Payment Type

- ☒ Faster Payment (No Fee)  
☐ CHAPs (£25.00 Fee)  
☐ Account To Account Transfer

Amount (GBP)

3 0 0 0 0 0 0

Date To Process

1 9 0 1 2 0 2 1

Amount in Words

Thirty thousand pounds only

## 3. Beneficiary Information

Beneficiary Name

SIR A.T. BROCKLEBANK

Beneficiary Sort Code

2 3 0 5 8 0

Beneficiary Account Number

1 8 5 1 4 6 1 3

Payment Reference (if applicable)

Partial PCLS - tax free cash

## 4. Customer Signature

Authorised Signature

Date: 18/01/2021

Authorised Signature

Date:

FOR INTERNAL USE ONLY

☐☐☐☐

Input By:

Signature:

Date:

Authorised By:

Signature:

Date: