<div align="center">

Benefit Crystallisation Event
Member Questionnaire

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Scheme Name: Abram Pension Plan SSAS
Member Name: Deirdre Abram
Date of birth: 25/04/1963

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

    X. I wish to draw all of my fund in Tax Free Cash and Income
    X. I wish to vest segments and take as Tax Free Cash and Income
    3. I wish to vest sufficient funds to provide a Tax Free Cash amount of £ 2000.00
    X. I wish to vest sufficient funds to provide an annual Income amount of £

Other (please detail)

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

X Yes
No

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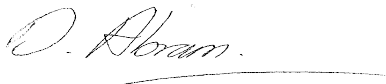
Date: _____

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 NHS Pension Scheme
% SLA 25%

Signed: *D. Abram*

Date: 23/04/2024