

**Benefit Crystallisation Event
Member Questionnaire**

Scheme Name: Carlton James Retirement Fund

Member Name: Beverley Barnett

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 draw all of my fund in Tax Free Cash and Income~~
2. ~~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 £ 2,500.00
4. ~~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 ?

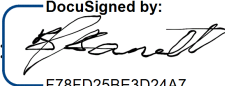
Yes
No ☒

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
% SLA

Signed: 
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Date: 30/3/2023

1. SCHEME DETAILS

Scheme NameRegistered Scheme Administrator Limited

Account Number00001096

2. PAYMENT DETAILS

Date to be actioned

Amount (GBP)£ 2,500.00

Amount in WordsTwo Thousand Five Hundred Pounds Only

3. BENEFICIARY

Beneficiary NameBeverley Barnett

Beneficiary Sort Code09 - 01 - 27Beneficiary Account Number10016699

Payment ReferencePCLS Payment

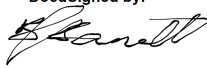
4. PURPOSE OF TRANSACTION - Description

PCLS Payment

We authorise the scheme administrator to make the payment on the date stated on this form in accordance with the following authorised account signatures.

5. TRUSTEE SIGNATURE

1st Signatory

DocuSigned by:

F78FD25BE3D24A7...

Name

Beverley Barnett

Date30/3/2023

2nd Signatory - if applicable

Name

Date