Sout 5 enail to Sonon 24/23.

Benefit Crystallisation Event Member Questionnaire

Scheme Name: Triory Gate SSAS Member Name: 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 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 # 200,000 = 30 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: Date: **Beneficiary Account Details** MR DT EVERAN & Mes AM CUERAN Account Name: Account number: 81741640 Sort Code 40-47-79 GIFT TO MICHAEL Reference