

Veterans UK Mail Point 480 Kentigern House 65 Brown Street Glasgow

G2 8EX

Tel: 0800 085 3600 Fax: 0141 224 2571

Michelle Lunnon Bespoke Pension Services Daws House 33 – 35 Daws Lane London NW7 4SD

01 May 2014

Our reference: DBS/PTV/B0522082

Your reference: PP/INFO/SG

Dear Ms Lunnon,

TRANSFER OF PENSION RIGHTS RE: Ms Amanda Cran, NI No: NB002986C

Thank you for your recent letters dated 8th April and 24th April 2014, regarding the transfer of pension rights for the above named.

Unfortunately we are unable to proceed with the payment of pension transfer at present as we have found that the details on the proof of address does not match the annex c completed by the member, copies of these are attached an highlighted.

Please can you provide us with matching paperwork, a blank copy of the annex C is also attached for your ease should you need this.

We would appreciate if you supply this paperwork as soon as possible to save any further delay

Yours faithfully

Clare McKenzie For Chief Executive Veterans UK

TRANSFER OF PENSION RIGHTS FOR ALL OTHER SCHEMES INCLUDING APPS, COMPS, STAKEHOLDERS OR CONTRACTED IN SCHEMES

This Annex should be returned to us through your new pension scheme administrators in order for us to receive their payment instructions.

Please complete and delete relevant sections including option A, B or C. Mrs A A W Cran NAME: B0522082 NI NUMBER: NB002936C SERVICE NUMBER: ADDRESS: TELEPHONE NUMBER: A. I wish to transfer the total value of my preserved pension benefits in the Armed Forces Pension Scheme [Insert Name of Pension Administrators] B. I wish to transfer only the value of my Protected Rights/ Guaranteed Minimum Pension (GMP)/ Non-Protected Rights in the Armed Forces Pension Scheme to: _ [Insert Name of Pension Administrators]. Q. I do not wish to proceed with the transfer out of the Armed Forces Pension Scheme. DATE: MARITAL STATUS: SIGNATURE: NB: Payment will not be made without the original signatures on this form. WITNESS I certify that the above was signed in my presence: are Levelyn NAME OF WITNESS *: ADDRESS OF WITNESS:

TELEPHONE NUMBER:

SIGNATURE OF WITNESS:

193 728261 DATE:

The witness must not be a relative, an employee of the Insurance/ Pension Scheme or an IFA involved with the transfer or a friend staying at the same address as the member.

Sortcode

83-2303 Account No 00169280

Statement of HRS AMANDA A W CRAN Account for CURRENT ACCOUNT

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MRS A A W CRAN ACACIA HOUSE 2 THE FIRS KEMBLE CIRENCESTER GL7 6AZ

Helensburgh Branch 2 Colquhoun Square Helensburgh G84 8SJ

01436 676011

Your Branch

0845 900 5960

Minicom Number

BIC RBOS GB 2L IBAN GB12 RBOS8323 0300 1692 80

BAC -Automate Pey in BCC -Bank Giro Pey in BSP -Branch	Particulars BALANCE FORWARD	Withdrawn	Paid in	2013	Balance 3356.38
Single Payment CDM -Cash & Deposit Machine a CHGCharges	POS 7630 20NOV13 TESCO STORES 3279 TETBURY 0B C/L 1 HSBC 21NOV	5.54 30.00		21NOV 21NOV	3320.84
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FPR -Payment Rucisimes IBP -Inter-Braz Payment [FT -Int Frue Throshold ≥ IMT-Interest	DPC CALL REF.NO. 0223 MANDIE CRAN	299.32		22NOV	
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POS -Debit Cau Transaction	4				
9007540 900 - Standing Order S8T - Funds Transfer TSU - Direct or Banking DPC - Transacti	a a				
Tel, or Po > Full details available on request.					
CARD USERS if your card is lost or stolen please contact your branch	Usts	Total Withdrawn	Total Paid in	2013	Balance
es toon es reasonably practicable		6197.59	8833.58		2938.32
or telephone: 08705 13 35 50	GO PAPERLESS AND GET YOU VIEW, DOWNLOAD AND PRIN				ANKING CO.UK/DIGITAL

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