

One Southampton Row London WC1B 5HA T: 0345 08 08 500 metrobankonline.co.uk

Registered Scheme Admin Ltd Venture Wales, Pentrebach Merthyr Tydfil **CF48 4DR**

12 March 2024

Dear Sir.

Account Name: THE LIONS SHARE - SM LTD RBS

Account Number: 45485489

Please find enclosed original documents relating to account holder Mr RLT Cusack.

We have kept scanned copies on file for our records.

Yours sincerely,

GDGUSTEL

Greg Elswood

Partnership Banking Director

abrda

PRIVATE AND CONFIDENTIAL Metro Bank Metro Bank plc 1 Southampton Row London WC1B 5HA

24 January 2024

Account holder Mr RLT Cusack Elevate account number EL1527490 Product Wrapper(s): Elevate PIA

Request for transfer

Dear Sirs

The above account holder has requested that their benefits held under your pension scheme are transferred to their Elevate Pension Investment Account.

I am enclosing their authority for you to proceed with the transfer and to provide Elevate with any necessary information.

Elevate has been advised that the whole of the benefits are to be transferred as a cash transfer and I have produced the Transfer Form accordingly. If this is not correct, and your member wishes to transfer assets by re-registration, please contact Elevate immediately on 0345 600 2399 and I will send you an additional form for completion.

Please complete the transferring scheme administrator's form in Section B.

Please send the completed transfer form and cheque to:

Elevate PO Box 6877 Basingstoke RG24 4RT

If you have any further queries please contact Elevate on 0345 600 2399. Please also ensure that you quote the Elevate account number when contacting us.

Yours sincerely,

Stuart Wemyss Client Services Director

Sturt Wenyss

Certified True Copy of Original

Elevate Po Box 6877 Basingstoke RG24 4RT

Section A - Client information and transferring scheme details

The client should check that the information below is correct, complete any missing information and sign the

The whole form should then be returned to Elevate at the address at the end of this section.

Mr Russell Luke Timothy Cusack

Permanent residential address

2 Pateman Close Buckingham

MK18 1JR

Gender

Date of birth

Male 14 January 1965

National Insurance number Elevate account number

NE392187B EL1527490 Metro Bank

Name of transferring scheme Transferring scheme address

Metro Bank plc 1 Southampton Row

London WC1B 5HA

Transferring scheme member reference number (e.g.

45485489

policy number)

Type of transferring scheme

Occupational

Transfer authority

By signing this form:

 To enable my transfer request, a conversion to a compatible share class may be processed by my current Plan Manager. This process typically takes several days to complete and therefore may slow down my transfer slightly.

I understand the fund management costs may also increase slightly depending on the share class used to allow the re-registration to happen.

Where applicable, Elevate will process a conversion to the cheapest available share class upon receipt of my re-registered holdings from my current Plan Manager.

- I authorise you, the scheme administrator, to transfer the whole of the benefits under the above named pension scheme to my Elevate Pension Investment Account;
- I authorise and instruct you to transfer funds from the plan(s) as listed in Section A of this form directly to Elevate. Where you have asked me to give you any original policy document(s) in return for the transfer of funds and I am unable to do so, I promise that I will be responsible for any losses and/or expenses which are the result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this form or with respect to benefits from the plan;
- I authorise you to release all necessary information to Elevate to enable the transfer of funds to Elevate;
- I authorise you to obtain from and release to the financial adviser named: Nigel Reeves, of Reeves Independent Limited any additional information that may be required to enable the transfer of funds;
- If an employer is paying contributions to any of the plans as listed in Section A of this form I authorise you release to that employer any relevant information in connection with the transfer of funds from the
- Until this application is accepted and complete, Elevate's responsibility is limited to the return of the total payment(s) to the current scheme administrator,
- Where the payment(s) made to Elevate represent(s) all of the funds under the plan(s) listed in Section A of this form then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from the plan(s) listed;

PIA Transfer Form

- Where the payment(s) made to Elevate represent(s) part of the funds under the plan(s) listed in Section A of this form, then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from that part of the plan(s) represented by the payment(s);
- I promise to accept responsibility in respect of any claims, losses and expenses that Elevate and the current scheme administrator may incur as a result of any incorrect information provided by me in this application or of any failure on my part to comply with any aspect of this application;
- If I have taken benefits from any pension arrangement, with the current or any other pension provider, in a way which means I am subject to the Money Purchase Annual Allowance (MPAA), I have supplied the date the MPAA first applied to me in the supplementary section for Question 8 in Part One Transfer

checklist	
Please tick the boxes below	
The details have been checked and are correct.	
This transfer form has been signed and dated.	

Client declaration

We recommend that before making this application that you have read 'Your Guide to the Elevate Pension Investment Account', along with the Elevate Guide to Re-registration Transfers.

I apply for the transfer of benefits from the scheme named above to the Elevate Pension Scheme (No 1) and/ or the Elevate Pension Scheme (No 2) and I authorise that scheme to pay the transfer value.

I understand that Elevate has asked specific questions that are relevant to whether or not it will accept the transfer of benefits. Elevate will rely on the information provided by the registered asset holder/scheme administrator/trustee of the transferring scheme and other information provided by my adviser to make a decision on the acceptance of my transfer application.

I confirm that I have checked the information above and that, to the best of my knowledge and belief, this information is correct and complete.

Elevate Portfolio Services Limited part of abrdn group will hold and use personal information supplied by you and the registered asset holder/your current Scheme Administrator/trustee to arrange for the transfer of pension scheme benefits, to set up and administer your Elevate Pension Investment Account. We may send your information in confidence for processing to other companies in the abrdn group (or companies acting on our instructions, introducers or intermediaries) including those outside of the European Economic Area.

In order to process some payments through the banking payments system, the bank may require the transfer of your personal information to countries which do not provide for the same level of protection for personal information as the UK, and may be provided to overseas authorities in order to comply with applicable legal obligations, and to investigate and prevent crime and terrorism.

By signing this form you consent to this use of your personal data.

Elevate Portfolio Services Limited will not share your personal information with any other company for marketing purposes. In partnership with your **adviser**, **we** would like to be able to let you know about enhancements to Elevate products and services and other products that **we** think would be of value to you.

We may contact you l	by post, phone or email. If you would prefer t	us not to	do this please tick this box
(For definitions, pleas	e refer to Elevate Terms & Conditions).		
Otherwise we will ass writing to Elevate, PO	ume you are happy to be contacted this way Box 6877, Basingstoke, RG24 4RT.	/. You ma	y change your mind at any time by
Client Signature	Russell Luke Timothy Cusack	Date	24-01-24

When the client has signed the transfer form it should be returned to Elevate, PO Box 6877, Basingstoke, RG24 4RT.

Section B - Instructions for the transferring scheme administrator

The scheme member named on the previous page has requested that the benefits from your pension scheme or insurance policy are transferred to their Elevate Pension Investment Account (PIA).

The Elevate PIA is a self-invested personal pension scheme.

It incorporates two separate schemes. The Elevate Pension Scheme (No 1) and the Elevate Pension Scheme (No 2). This transfer will be paid into the Elevate Pension Scheme (No 1) unless we specifically agree with the scheme member to pay the transfer into the Elevate Pension Scheme (No 2). Both schemes are registered with HM Revenue and Customs (HMRC) under Part 4 of Finance Act 2004. Their pension scheme tax reference numbers are shown below.

Elevate PIA scheme details

1	Scheme's full name	Elevate Pension Scheme (No 1) and/or
2	Elevate account number Pension scheme tax reference number	Elevate Pension Scheme (No 2) EL1527490 No. 1 00721488RW No. 2 00721493RL

Transferring scheme details

Elevate cannot accept transfers in any of the following situations; if any of these apply please contact Elevate. You can find our contact details at the end of this form.

- A. If all or part of the transfer payment directly or indirectly arises from uncrystallised rights under an approved occupational pension scheme where, on or after 27 July 2004 but before 6 April 2006 the member had elected to take a tax-free lump sum while deferring receipt of the pension.
 B. If any part of the transfer payment in representations are supported in the pension.
- B. If any part of the transfer payment in respect of uncrystallised funds arises from a pension sharing order from a pension in payment.
- C. If any part of a drawdown pension fund has been used to purchase a short term annuity which is still in payment.

Please complete the remainder of this form as it applies to the benefits being transferred to the Elevate PIA and sign the declaration at the end. abrdn cannot accept the transfer payment without a fully completed transfer form.

Part One should be completed for all transfers.

Tra	you have any questions about this form please contact Elevates form. ansferring scheme name					
	nsion scheme tax reference number					
	tan volorence number					
Pa	rt One. Transfer details					
1	What is the estimated total transfer payment?		,			
2	What is the total uncrystallised cash value?	£				
Is the transfer from an occupational pension scheme?						
	paradia danonia:		Yes			
_			168	Ц	No	\Box
1	Does any part of the transfer relate directly, or indirectly, to Guaranteed Minimum Pension?					
	addranteed Wilnimum Pension?		Yes		No	
-	If yes to Question 4.					_
	How much was the Guaranteed Minimum Pension, if known	,,]				
	Is the transfer from an individual pension plan, providing for		£			
	or guaranteed benefits, which replaced similar bandita und		Yes			
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	Is the transfer in respect of death benefits paid to the client?	, +				
		- 1	Yes		No	
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	Is the client subject to the Money Purchase Annual Allowand (MPAA)?	- 1		\Box		
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Subject: Reeves Independent- Documents to Proceed- R L T Cusack

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Signup@reevesifa.com IP Address: 91.110.139.176

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Russell Luke Timothy Cusack

russellcusack@thelionsshare-sm.co.uk Security Level: Email, Account Authentication

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Signature

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Initials: 0

Russell Luke Timothy Cusack

Signature Adoption: Pre-selected Style Using IP Address: 46.64.232.181

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Sent: 24-01-24 | 15:56 Viewed: 24-01-24 | 16:32 Signed: 24-01-24 | 16:37

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Accepted: 24-01-24 | 16:32 ID: ad7126b2-6bf5-46c8-b76b-9dc729c4999b

lewis Roberts

lewis.roberts@reevesifa.com

Security Level: Email, Account Authentication

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Lewis Roberts

Signature Adoption: Pre-selected Style

Using IP Address: 31.22.0.73

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Resent: 25-01-24 | 14:22 Viewed: 25-01-24 | 14:23

Signed: 25-01-24 | 14:23

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Electronic Record and Signature Disclosure:

Accepted: 25-01-24 | 14:23

In Person Signer Events

ID: e1984914-f3be-458c-97bb-4ca6dc3e7fd6

Signature Timestamp

Editor Delivery Events Status Timestamp

Agent Delivery Events Status

Intermediary Delivery Events Status

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Completed	Contract of	25-01-24 14:23		
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ii. send us an email to admin@reevesifa.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

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- Until or unless you notify Reeves Independent as described above, you consent to receive
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