

# FAMILY SUNTRUST

## SCHEME PENSION DEATH BENEFIT INSTRUCTIONS

Phoenix Wealth, Self Invested Pensions, PO Box 1394, Peterborough, PE2 2TQ.

### When to use this form

This form should be completed by a Member to indicate how their remaining Scheme Pension fund share should be dealt with when they die. It should also be used to make any changes to Scheme Pension death benefit instructions previously given.

Please speak to the Financial Adviser before completing this form as there may be a liability to inheritance tax.

### Integrated trust

If you have already set up an integrated trust to receive your lump sum death benefit we can no longer guarantee we will pay the trust when you die. However, we will assume, unless you tell us otherwise, that a lump sum is to be paid to the integrated trust.

### 1. FAMILY SUNTRUST SCHEME DETAILS

<b>Scheme name</b>	Family Suntrust Scheme (the 'Scheme')
<b>Scheme number</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>Member's full name</b>	

### 2. INSTRUCTIONS WHERE SCHEME PENSION IS PAYABLE FOR ANY REMAINING FIXED PERIOD

#### Expression of wish

If you selected a fixed period for the payment of Scheme Pension we, as the Scheme Administrator, will use our discretion to pay any remaining pension payments. We will take into account your wishes expressed in this table.

Beneficiary's full name	Relationship to you	Date of birth	Proportion of each remaining pension payment %
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

### 3. INSTRUCTIONS FOR ANY POTENTIAL ANNUITY PROTECTION LUMP SUM

You can use your share of the Scheme Pension fund not being used to provide benefits under section 2 to pay an annuity protection lump sum through an expression of wish. You can name anyone as a beneficiary. We will then apply the fund at our discretion, taking into account your wishes.

Complete the table to make an expression of wish.

Beneficiary's full name	Relationship to you	Date of birth	Proportion of each remaining pension payment %
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

### 4. INSTRUCTIONS FOR A POTENTIAL DEPENDANT'S PENSION

If you have a spouse or civil partner when you die you can use your share of the Scheme Pension fund not being used to provide benefits under sections 2 and 3 to give them a dependant's pension. We will be bound by this instruction.

Complete the table to make an allocation.

Beneficiary's full name	Relationship to you	Date of birth	Proportion of each remaining pension payment %
	<input type="checkbox"/> Spouse <input type="checkbox"/> Civil partner	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	%

### 5. DECLARATION OF CONSENT

I understand that:

- I can change or remove the expression of wish or allocation at any time by giving you instructions in writing.

I confirm that:

- to the best of my knowledge and belief, the statements made in this form, including those not in my handwriting, are correct and complete.

Signature:

×

Date:

  /   /