

AVC Application Form



Member No

Full Name: Mr/Ms/Miss/Mrs _____ (CAPITALS)

NI Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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I wish to stop/start/alter* my AVC contributions.

* please delete where applicable.

The amount to be deducted from my pay in the future should be:

a) £ per month (enter £0.00 if you are stopping contributions)
or (minimum contribution £10 per month, unless stopping contributions)
b) % of my pay (including Main Scheme contributions*)

NB Total contributions (including contributions to the Main Scheme*) cannot exceed 80% of your total pay

*If you take part in XTRA then contributions to the Main Scheme means those contributions that the company is paying on your behalf.

I wish to invest the contributions in one of the following: (You can invest in a maximum of six funds at any one time.)
(Please show how you wish these to be split, eg: Baillie Gifford Managed Fund 75%/Friends Provident UK Equity Fund 25%).

Friends Provident Fixed Interest	<input type="text"/> %	Friends Provident Cash	<input type="text"/> %
BGI UK Corporate Bond Index	<input type="text"/> %	Baillie Gifford International	<input type="text"/> %
Baillie Gifford Managed	<input type="text"/> %	Friends Provident Global Equity	<input type="text"/> %
Friends Provident Managed	<input type="text"/> %	Friends Provident UK Equity	<input type="text"/> %
Total allocation of contributions (This must equal 100%)			100 %

Signed: _____ Date: _____
(When complete, please return to your Payroll Office)

FOR PAYROLL USE ONLY

Date this contribution was first deducted _____

It is certified that the total pension contribution is within the current scheme limits.

Signed: _____ Date: _____