

THE HARTLEY PENSION SCHEME

EXPRESSION OF WISHES

Member Name			
Scheme Number			
schemes Trustee, Hartle aware of the members ca	y Pensions Trustees Limited as wishes, you are requested to n be changed at any time by	any payments due on the death of a member a directed by the scheme administrator. In order complete this Expression of Wishes form. Detai you completing a new form to replace earlier in	that the scheme administrator is ils of your intended beneficiaries enstructions.
· ·	·	ole so it is important that members consider wh regular intervals, particularly when there is a cha	
or spouses/dependants	s income from The Hartley Per on, I would like it to take into	DECLARATION ns Trustees Limited has absolute discretion as to use the nation scheme in the event of death. However, if account that my wishes as to how benefits shown change or cancel this statement at any time.	f and when the scheme Trustee ould be paid are stated below.
Full name of pers I wish to benefi		Address	Proportion/Order of preference
		Notes	
	•	Notes e to benefit only if your other proposed recipier f they die before you, children in equal proportion	
explain this. (For exampl	•	e to benefit only if your other proposed recipier f they die before you, children in equal proporti	

Please return completed form to:

Hartley Pensions Ltd, 5th Floor, 25 Marsh Street, Bristol, BS1 4AQ. Authorised and regulated by the Financial Conduct Authority 735936 and registered in England and Wales 094695576. T:0117 316 9991 E: admin@hartleysas.co.uk W: www.hartleypensions.com

