

## THE HARTLEY PENSION SCHEME

## **EXPRESSION OF WISHES**

Member Name			
Scheme Number			
schemes Trustee, Hartle aware of the members ca	y Pensions Trustees Limited as ownshes, you are requested to confide the changed at any time by you	any payments due on the death of a member are made directed by the scheme administrator. In order that the omplete this Expression of Wishes form. Details of you completing a new form to replace earlier instruction	ne scheme administrator is our intended beneficiaries ons.
· ·	-	le so it is important that members consider what the egular intervals, particularly when there is a change in	
or spouses/dependants	s income from The Hartley Pens on, I would like it to take into a	DECLARATION s Trustees Limited has absolute discretion as to how sion scheme in the event of death. However, if and viccount that my wishes as to how benefits should be n change or cancel this statement at any time.	vhen the scheme Trustee
Full name of pers I wish to benefi		Address	Proportion/Order of preference
	,		
		Notes	
		<b>Notes</b> to benefit only if your other proposed recipients have they die before you, children in equal proportions.)	e died before you, please
explain this. (For exampl		to benefit only if your other proposed recipients hav they die before you, children in equal proportions.)	e died before you, please

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 09469576. T:0117 316 9991 E: admin@hartleysas.co.uk W: www.hartleypensions.com

