

Vodafone Pensions



Transfer out request form

Your details (please use CAPITAL letters)

Surname:	Title:
First name(s):	Date of birth:
National Insurance number:	
Address:	
Postcode:	

Complete this form if you are are thinking about transferring the value of your benefits in the Vodafone Group Pension Scheme to another registered pension scheme.

New pension scheme (please use CAPITAL letters)

Name of new pension scheme/ Insurance Company:	
Address of new pension scheme/ Insurance Company:	
Reference code (if applicable):	

Please turn over to sign the declaration

Declaration

I understand that by completing this form I am authorising the Company to send details of my transfer value to the pension scheme named overleaf.

Signed:

Date:

Please return this form to:

Scan and email to: vodafonepensions@wtwco.com

By post to: Vodafone Pensions, WTW, Sunderland, SR43 4JU