



ROCHE PENSION FUND - DB SECTION TRANSFER-OUT REQUEST

Name of the member:		
Reference number:		
National Insurance number:		
Date of birth:		
Your current address:		

I am thinking about transferring my benefits in the Fund to either

a) Another UK registered pension plan

or

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(Please tick the box that applies)

I authorise the Trustees of the Roche Pension Fund and Willis Towers Watson Limited on their behalf to provide all relevant information to the organisation named below.

Please use BLOCK CAPITALS

Scheme name:				
Reference number:				
Address and post code:				
Signature:	Date:			

Print name: _____

Please complete and return this form to: Roche Pension Fund, WTW, PO Box 545, Redhill RH1 1YX or email it to rochepensions@wtwco.com