

Please return forms to: The Emerson UK Pension Plan, Buck (Manchester), PO Box 324, Mitcheldean, GL14 9BJ

Part A Personal details

Title:	Mr / Miss / Mrs / Ms / Dr (delete as applicable) / other _____		
Surname:	<input type="text"/>	Forenames (in full):	<input type="text"/>
Date of birth:	<input type="text"/>	NI number:	<input type="text"/>
Telephone number:	<input type="text"/>	Email:	<input type="text"/>

Part B Bank details

Name(s) of account holder(s):	<input type="text"/>		
Bank name:	<input type="text"/>		
Bank address:	<input type="text"/>		
Sort code:	<input type="text"/>	Account number:	<input type="text"/>

Part C Declaration

I wish for my payment arising from the Plan to be paid into the abovenamed bank account.

Signature: _____ **Date:** _____

Name: _____

The information provided will be processed by Buck for purposes only associated with the Emerson UK Pension Plan and will be used in accordance with its policies and the Trust Deed and Rules and the applicable data protection legislation.