

Divorce Transfer Value Quotation

Please complete this form in BLOCK CAPITALS and return to: Pensions Department, PO Box 567, Welwyn Garden City AL7 9NN.

About you	* Indicates require
Full name*	Employee/Pensioner number*
Email address*	You might find this 8-digit number on your pension statement or payslip
inun addi ess	
National Insurance number*	Date of birth (DD/MM/YYYY)*
Phone number*	
Divorce details	
s this a Scottish divorce?* Please tick one	Date of separation/divorce (DD/MM/YYYY)*
Yes No	
Oo you currently pay or have you ever paid Additional Voluntary Contributions (AVCs)?* Please tick one	Yes No Unsure
NOTE: Additional request within a 12 month period – charg	ge of £250.00
Please sign & date this form before sending it to us.	
To the best of my knowledge and belief, the details I have a	given on this form are correct and complete.
Your signature*	Date (DD/MM/YYYY)*
We may contact you to verify your identity.	

Information collected using this form will be processed by, or on behalf of, the Trustees of the Tesco Plc Pension Scheme for the purposes of administering the scheme. Further details can be found in our data protection notice, available at pensionwebsite.co.uk, or by contacting us at the above address.