

AVC Switch Form



You should complete this form if you wish to switch your current AVC Fund.

Basic Information:

| | |
|----------------|----------------|
| Surname: | Forenames: |
| Member Number: | Date of Birth: |

Your Current Fund:

| I instruct you to switch my current AVC fund as follows: (please tick the box* that applies and specify the percentage split) | | | * | % |
|--|--|--|---|------|
| Clerical Medical With Profits Fund | | | | |
| Clerical Medical Managed Funds: | | | | |
| Balanced Managed Fund | | | | |
| Cautious Managed Fund | | | | |
| Adventurous Managed Fund | | | | |
| Non-Equity Managed Fund | | | | |
| International Fund | | | | |
| Clerical Medical Speciality Funds: | | | | |
| UK Equity Fund | | | | |
| Equity High Income Fund | | | | |
| UK Tracker Fund | | | | |
| Ethical Fund | | | | |
| European Fund | | | | |
| North American Fund | | | | |
| Japan Fund | | | | |
| Pacific Fund | | | | |
| Property Fund | | | | |
| Retirement Protection Fund | | | | |
| Gilt & Fixed Interest Fund | | | | |
| Index-Linked Fund | | | | |
| UK Smaller Companies Fund | | | | |
| The Cash Fund | | | | |
| Halifax Fund | | | | |
| Clerical Medical Balanced Lifestyle Investment Programme | | | | |
| Total of the above must add up to | | | | 100% |

Your future contributions:

| | |
|--|--------------------------|
| I wish my future AVCs to be invested in the same way as above (tick box if this applies) | <input type="checkbox"/> |
|--|--------------------------|

| | |
|------------|-------|
| Signature: | Date: |
|------------|-------|