



### Section 3 – Required documents

Please tick to confirm you have included copies of documents with this form

<input type="checkbox"/>	Copy of your passport
<input type="checkbox"/>	Copy of spouses passport (if applicable)

### Section 4 – Your signature

By signing this claim form I confirm:

- *I wish to receive an estimate of the benefits from the Falkland Islands Pension Scheme.*
- *I authorise the Pensions Board to contact my previous employers to obtain information relating to my employment (e.g. employment dates, pensionable salary)*
- *That this request is from me and that I understand that the Falkland Islands Pensions Scheme administrators cannot provide me with any financial advice.*

Signed		Date	
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