

AIRWAYS PENSION SCHEME (APS) – AVC SWITCH FORM

Use this form if you would like to change how the money already in your AVC account is invested.

Remember to fill out the investment options for any *SmartAVCs* you save and any normal AVCs you pay in the future if you would like to change how your future AVCs are invested too.

We will need to receive this form by the 20th of the month in order to process your instructions from the first day of the following month. If your instructions are received after the 20th of the month they will be processed on the 1st day of the next available month (unless you specify a future date).

AVC Fund switches:

Indicate below what percentage you wish to switch out of your selected AVC fund and where you would like this to be invested.

Switch my existing AVC account balance(s)

I wish to switch the following funds, with effect from _____ (date)

FROM MPF _____ % to SGF*

FROM MPF _____ % to EBF*

FROM SGF _____ % to MPF*

FROM SGF _____ % to EBF*

FROM EBF _____ % to SGF*

FROM EBF _____ % to MPF*

*** PLEASE ALSO COMPLETE THE AVC INVESTMENT OPTIONS BOX BELOW IF YOU WOULD LIKE YOUR FUTURE CONTRIBUTIONS INVESTED IN THE SAME WAY.**

Future AVC investment options:

Please invest my FUTURE AVCs as follows:

MPF _____ % SGF _____ % EBF _____ %

- This instruction will take effect from the same date as your switch instructions above.
- Your investment choice must be expressed as a percentage and total 100%.
- You can invest all of your AVCs in one fund or you can split the investment between any of the three funds, (e.g. MPF 25%, SGF 50%, EBF 25%).
- The same investment instruction will apply to both any SmartAVCs you save and any normal AVCs that you pay.

Declaration

I authorise British Airways Pensions to change the investment of my existing AVC balance and/or my future AVC payments as instructed above. I agree to be bound by the provisions of the Trust Deed and Rules of the Airways Pension Scheme as amended from time to time.

By signing this form, I confirm that I have read the AVC Plan leaflet, which explains the treatment of my AVCs in the event of any potential Scheme termination or wind-up in the future.

Signed _____

Date _____

Name _____

Staff No: _____

Please return your completed form:

Scan/attach to an email to: post.inbound@bapensions.com

By post to: BA Pensions, PO Box 2074, 8 Castle Street, Liverpool, L69 2YL