

The independent pension platform

## Payment Order – Transfer to a Swiss Pension Institution

<b>Vested benefit account</b>	Account number	Amount to be transferred	Desired transfer date
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	<hr/>		
<b>Client particulars</b>	Name	First name	
	<hr/>		
	Street, N°	Postal code, place	
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Country	Civil status		
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<b>Transfer to a new pension plan</b>	Name of employer (if applicable)	Contract/account number	
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	Name of pension plan		
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Street, N°	Postal code, place		
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<b>Payment instructions</b>	If possible, please attach a payment slip.		
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	Post office account		
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Bank	Account number/IBAN		
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Clearing number	References		
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<b>Declaration</b>	I hereby confirm that the above indications and the documentation produced are true and complete. I authorise Liberty Foundation for Vested Pension Benefits (the "Foundation") to make additional investigations.		
	I hereby also instruct the Foundation to sell my securities investments. The proceeds of the sale are to be credited to my vested benefit account until disbursement. If the cash payment cannot be authorised, the proceeds of sale are to remain on my vested benefit account failing any other instructions on my part.		
<b>Signature</b>	<hr/>		
	Place, date	Client's signature	
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