



# Parliamentary Contributory Pension Fund - CARE sections Authority form

## Your details (please complete in BLOCK CAPITALS)

**Title:** (please specify)

Mr  Mrs  Miss  Other

Forenames:

Surname:

Ni no.

PCPF member no. (if known)

Home address:

Postcode:

Telephone no.

Mobile no.

Email:

I am contributing to the  MPs' Pension Scheme  Ministerial Pension Scheme **(tick as appropriate) ✓**

## Current pension adviser details (e.g. Bank or independent financial adviser)

**I authorise RPMI as Scheme administrator or the Pensions Unit as Secretariat to discuss and disclose details of my pension with my current adviser(s):**

Name:

Address:

Postcode:

Telephone number:

## Member declaration

Please note that this authority is only valid for six months from the date of signature. After this date you will need to complete a new authority.

**Member signature:**

Date: / /

**Please return this form to:** PCPF Administration Team, RPMI, PO Box 193, Darlington DL1 9FP

Administered by RPMI: PCPF, PO Box 193, Darlington DL1 9FP. T: 0845 555 3377 F: 01325 343 177 e: PCPF@rpmico.uk  
Calls cost 5p per minute plus your phone company's access charge.

The Trustees, the Secretariat and their advisers, and the administrators of the Fund, will process personal data in relation to you in order to administer the Fund. This may include sensitive data (as defined in the Data Protection Act 1988). In accordance with the Data Protection Act 1998, all information concerning Fund members and their dependants will be treated by the Trustees and their advisers as confidential. If you wish to inspect any data that is held about you, please contact the administrators of the Fund.