

**AW8 – Supplementary Form (Benefits payable from later date)**

Member Name:

SD Reference Number:

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Date of Leaving NHS Pension Scheme:

		/			/				
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**Reason For Retirement (please tick)**

Age

Payable Date 

		/			/				
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Early Payment of Preserved Benefits

Payable Date 

		/			/				
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Early Payment of Preserved Benefits on the grounds of Ill Health Retirement\*

Payable Date 

		/			/				
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\*Before indicating Ill Health as the reason for claiming, please ensure that you have seen the letter accepting the member for retirement on medical grounds