
JSS Pensions Administration

Polaris House North Star Avenue Swindon Wiltshire SN2 1UY

Changing your Partnership contributions

You **must** complete parts A, B and C of this form and return it to JSS

Part A - Your details

Your name

Your employer

Your home address

Phone number

Email address

Date of birth

National Insurance number

Part B - Your Partnership pension account details

Partnership provider

Scottish Widows

Standard Life

<input type="checkbox"/>
<input type="checkbox"/>

The **partnership** contribution rate you wish to make
This will take effect from the next available pay run.

% of salary

Part C - Authority

I authorise my employer to deduct my **Partnership** pension account contributions from my salary, at the rate shown in Part B above.

Signature: _____

Date: ____ / ____ / ____