

Nomination of beneficiary form

Scheme Name: **DC Pension Scheme** (hereinafter referred to as the scheme)

Personal details: ^{Miss}
Full name including title: ~~Mrs~~ Heather Kirsten Finlay
Date of birth: 07 March 1969

In the event of my death, I, the member of the scheme in trust, request that the funds should be paid to (please refer to the notes below):

Name: ALISON FINLAY Address: SOUTHERLY CHILWORTH RING CHILWORTH SO16 7HW Proportion % 50%	Name: FIONA LANGDON Address: 3 SAVILE ROAD LINDFIELD HAYWARDS HEATH RH16 2NY Proportion % 50%
Name: Address: Proportion %	Name: Address: Proportion %

Declaration

I confirm that:

- i) this supersedes all previous beneficiary nominations; and
- ii) I may revoke this request at any time by submitting a new form to the scheme Administrator

Signature of member: Heather Finlay Date: 27/10/17

Notes:

The member's estate cannot be nominated.
If the member does not complete a nomination form the death benefit would be payable to (or may be applied for the benefit of) such one or more of the member's dependants or named class as the nominated trustee decides, acting in accordance with the governing Trust Deed and Rules.