

**Nomination of beneficiary form**

**Scheme Name: HUTCHINSON PENSION FUND SECOND GENERATION (hereinafter referred to as "the scheme")**

**Personal details**

**Full name including title: DEREK ANTHONY HUTCHINSON**

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: *Carole B Hutchinson*

Name:

Address: *Leacockknowe  
Jubilee Path  
Leppford  
DG5 4LW*

Address:

Proportion % *100%*

Proportion %

Name:

Name:

Address:

Address:

Proportion %

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: *[Signature]*

Date: *20/10/15*

**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.

**Nomination of beneficiary form**

**Scheme Name:** HUTCHINSON PENSION FUND SECOND GENERATION (hereinafter referred to as "the scheme")

**Personal details**

**Full name:** MARTIN DEREK HUTCHINSON

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: DANIELLE HUTCHINSON Name:

Address: WATERSIDE HOUSE Address:

DALTON  
LOCKERIE  
DGLI IAT

Proportion % 100 %

Proportion %

Name:

Name:

Address:

Address:

Proportion %

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:**



**Date:** 20/10/2015

**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.

### Nomination of beneficiary form

**Scheme Name:** HUTCHINSON PENSION FUND SECOND GENERATION (hereinafter referred to as "the scheme")

**Personal details**

**Full name:** MICHAEL ANTHONY HUTCHINSON

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: The Hutchinson Pension Fund 2<sup>nd</sup> Generation

Name:

Address:

Knockknowe  
Gubilee Path  
Leppanoe

Address:

Proportion %

DGS 4 LW  
100 %

Proportion %

Name:

Name:

Address:

Address:

Proportion %

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:**

*M Hutchinson*

**Date:**

21/10/15

**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.

### Nomination of beneficiary form

**Scheme Name:** HUTCHINSON PENSION FUND SECOND GENERATION (hereinafter referred to as "the scheme")

**Personal details**

**Full name:** HAYLEY MARIE HUTCHINSON

Now, Hayley Marie Treeby

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:** CLARK TREEBY

**Name:**

**Address:** EDWISTON HOUSE

**Address:**

NETHERMILL  
PARKGATE,  
DUMFRIES  
DG1 3NQ

**Proportion %** 100 %

**Proportion %**

**Name:**

**Name:**

**Address:**

**Address:**

**Proportion %**

**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:**

**Date:** 20/10/15

M.M. Treeby

### **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.

**Nomination of beneficiary form**

**Scheme Name:** HUTCHINSON PENSION FUND SECOND GENERATION (hereinafter referred to as "the scheme")

**Personal details**

**Full name:** CAROLE BARBARA HUTCHINSON

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: Derek Hutchinson Name:

Address: Knockielknowe Address:  
Jubilee Path  
Kippford DG54LW

Proportion % 100 % . Proportion %

Name: Name:

Address: Address:

Proportion % 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:** *b Hutchinson*

**Date:** 20/10/15

**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.

### Nomination of beneficiary form

Scheme Name: **Hutchinson Pension Scheme Second Generation** (hereinafter referred to as the scheme)

**Personal details:**

Full name including title: Mrs. Emma Carole Irving

Date of birth: 27 November 1979

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: <i>Craig Irving</i> Address: <i>2 ALSTONBY COURT</i> <i>WESTLINTON</i> <i>CARLISLE CA6 6AF</i> Proportion % <i>33.33</i>	Name: <i>Toby Irving</i> Address: <i>2 ALSTONBY COURT</i> <i>WESTLINTON</i> <i>CARLISLE CA6 6AF</i> Proportion % <i>33.33</i>
Name: <i>Jake Irving</i> Address: <i>2 ALSTONBY COURT</i> <i>WESTLINTON CA6 6AF</i> Proportion % <i>33.33</i>	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: *Emma*

Date: *20.10.15.*

**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.