

THE
DAVID JOHN NICKLIN
NOMINATION OF DEATH
BENEFITS

(REFERENCE 160154 / 04DXN)

Countrywide Tax & Trust Corporation Ltd
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c o u n t r y w i d e
Tax & Trust Corporation Ltd

**NOMINATION OF DEATH BENEFITS
THE DAVID JOHN NICKLIN FAMILY PENSION DEATH
BENEFITS TRUST**

This Nomination is made this 14th day of February 2017

To the Trustees of the Pension policy/scheme named below:

Pension Provider	PENSION PRACTITIONER
Pension Provider Address	33-35 Daws Lane London NW7 4SD
Pension Member Full Name	DAVID JOHN NICKLIN
Payroll Number / Policy Number	MDJ SSAS
National Insurance Number	NS206994A

I understand that in the event of my death any death benefits that may be due will be distributed at the discretion of the Pension Trustees from the above scheme or plan or any benefit provided by any subsequent plan or scheme for the member.

I would ask that you consider my wishes as set out in this Expression of Wish and furthermore I request that the trustees of the trust named below be consulted at such time that benefits are payable with regard to how best to allocate them.

It is my wish that the Death Benefits of my Pension Plan be paid directly to the Trustees of **THE DAVID JOHN NICKLIN FAMILY PENSION DEATH BENEFITS TRUST** upon my death to hold for the beneficiaries of the Trust.

These presently being:

Trustee No: 1. DAVID JOHN NICKLIN of 20 Cromer Road Cheadle Stockport SK82AX

Trustee No: 2. JENNIFER CRAWFORD of 20 Cromer Road Cheadle Stockport SK82AX

Trustee No: 3. BETHANY NICKLIN of 33 Church Street Wincham CW96EP
(the Trustees of **THE DAVID JOHN NICKLIN FAMILY PENSION DEATH BENEFITS TRUST**)

Should the above named trustees or their successors refuse The Nominated Benefits or any part thereof then it is my wish that Pension Benefits be made available to the nominated beneficiaries as named in Schedule 1 or a fund or policy under the Pension Freedom flexi access legislation.

Schedule 1. Flexi Access Nominated Beneficiaries.

- i. 1/5 to my partner JENNIFER CRAWFORD
- ii. 1/5 to my son JACK NICKLIN
- iii. 1/5 to my daughter BETHANY NICKLIN
- iv. 1/5 to my daughter FAYE NICKLIN
- v. 1/5 to my daughter LUCY NICKLIN

Should any named nominated beneficiary above predecease me or wish to refuse or reduce their share of the fund in favour of another named beneficiary as follows, I would wish that this be completed before allocation to the new flexi access funds.

In the event that my partner JENNIFER CRAWFORD predeceases me, I would ask that their share be distributed to the surviving beneficiaries named in Schedule 1 above in equal shares if more than one.

In the event that my son JACK NICKLIN predeceases me, I would ask that his share be distributed to the surviving beneficiaries named in Schedule 1 above in equal shares if more than one.

In the event that my daughter BETHANY NICKLIN predeceases me, I would ask that her share be distributed to the surviving beneficiaries named in Schedule 1 above in equal shares if more than one.

In the event that my daughter FAYE NICKLIN predeceases me, I would ask that her share be distributed to the surviving beneficiaries named in Schedule 1 above in equal shares if more than one.

In the event that my daughter LUCY NICKLIN predeceases me, I would ask that her share be distributed to the surviving beneficiaries named in Schedule 1 above in equal shares if more than one.

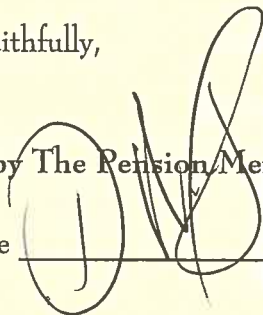
I understand that these are my wishes at the time of signing this Nomination and I understand that should my circumstances and/or wishes change in the future that I should review this Nomination.

I accept that it is solely my own responsibility to provide any revised wishes in writing to my flexi scheme provider. Likewise to provide a similar nomination to any new scheme provider.

Yours Faithfully,

Signed by The Pension Member DAVID JOHN NICKLIN

Signature

A handwritten signature in dark ink, appearing to read 'D. J. Nicklin', is written over a horizontal line. The signature is stylized with large, sweeping loops.