

Expression of Wish form

To: The Trustee of the FDR Limited Pension Scheme

In the event of my death, I wish the following person or persons to benefit, in accordance with the Trust Deed and Rules, in the proportions set out below. *This cancels any previous wish I may have expressed on this connection.* I understand that the Trustee is not bound to act in accordance with this wish in deciding to whom and in what proportion the sums set out in the Rules of the Scheme should be paid.

Full name and address of beneficiary	Relationship	Proportion of benefit

Member's Signature:

Member's Name:

Member's National Insurance no:

Date:

Notes

It is up to the Member to notify the Trustee of any change in circumstances requiring an alteration to their nomination.

If the Member wishes any lump sum to be distributed in accordance with their will, they should request payment to be made to their legal personal representatives;

On completion, please return this form to:

The Trustee of the FDR Limited Pension Scheme c/o Capita, PO Box 555, Stead House, Darlington, DL1 9YTL or by email to fdr@capita.co.uk