

## Nomination of beneficiaries

This form should be completed if you have any of the following products:

- Zurich Retirement Saver
- Corporate Personal Pension Plan
- Group Personal Pension Plan
- Group Stakeholder Pension Plan
- Group Transfer Plan (issued since November 2010)

By completing and returning this form, you can tell Zurich (Zurich Assurance Ltd or Sterling ISA Managers Limited) your wishes for paying death benefits.

Your nomination is fully considered however, it's not binding and Zurich has discretion in paying death benefits.

It's a good idea to review your nomination when there's a change in your personal circumstances. You can alter or revoke your nomination by letting us know.

The completed form should be posted to Zurich Corporate Savings, PO Box 135, Cheltenham, GL52 8ZP.

Please complete all sections of this form that apply to you in BLOCK CAPITALS.

## Name Membership number

## 2 Beneficiaries

1 Your details

You should consider what you wish to happen if the beneficiary (or one of the beneficiaries) dies before you, for example 'my husband/wife but if he/she dies before me, to all my children who are living at the time of my death, in equal shares.' Please write any instruction like this in the 'Further instructions' box.

Please ensure the percentages add up to 100%.

Full name	
Address	
Relationship	% share
Full name	
Address	
Relationship	% share

## 2 Beneficiaries (continued)

Full name	
Address	
Relationship	% share
Full name	
Address	
Relationship	% share
Full name	
Address	
Relationship	% share
Further instructions	
3 Authorisation	
In the event of my death, I wish the scheme administrator to consider paying the bene supersedes any earlier 'Nomination of beneficiaries' form I may have completed for this	eficiaries above in the proportion(s) indicated. This form s plan.
Signature	
	Date D D M M Y Y Y

Zurich Assurance Ltd.
Registered in England and Wales under company number 02456671.
Registered Office: The Grange, Bishops Cleeve, Cheltenham, GL52 8XX.

