



Multi-Platform International Open Pension - Form A - Nomination of Death Beneficiaries

Full Name

Member Number

You may request that any of your pension fund remaining on your death is divided between two or more persons. Please state each person's name and address in the first column and the desired percentage proportion of your available fund in the third column. This nomination can be changed by submitting a replacement nomination form to us at any time.

In the event of my death I would like any sums payable under my Multi-Platform International Open Pension to be paid to the following person or persons in the manner shown below.

I understand that in exercising your discretion in the disposal of the benefits you will not be bound by my nominations but you will bear them in mind.

Full name and address of beneficiary	Relationship to you	%
	Total: (Must add up to 100%)	100 %

We recommend that you review your nomination(s) regularly, particularly if either your circumstances, or those of your beneficiaries, change. Upon notification of your death, we will refer to the most recent signed nomination received by us.

Signed

Date

D	D	M	M	Y	Y	Y	Y
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