

Scheme Name: Bowers SSAS (hereinafter referred to as the scheme)

Personal details:

Full name including title: Mr. Benjamin James Bowers

Date of birth: 15 August 1978

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: Luce Essential Address:	Name: Address:
Proportion % 100	Proportion %
Name: Address:	Name: 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: Junpin Date: 01/10/16

Notes:

The member's estate cannot be nominated.

Nomination of beneficiary form

Scheme Name: **Bowers SSAS** (hereinafter referred to as the scheme)

Personal details:

Full name including title: Mrs. Lucy Bowers

Date of birth: 02 July 1981

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: Box Box Address:	Name: Address:
Proportion % L	Proportion %
Name: Address:	Name: 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: 1-10-2016

Notes:

The member's estate cannot be nominated.

Nomination of beneficiary form

Scheme Name: Bowers SSAS (hereinafter referred to as the scheme)

Personal details:

Full name including title: Mr. Malcolm Bowers

Date of birth: 04 February 1949

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: Address:	Name: Address:
Proportion % Voc .	Proportion %
Name: Address:	Name: 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: | | 11 2016

Notes:

The member's estate cannot be nominated.

Nomination of beneficiary form

Scheme Name: **Bowers SSAS** (hereinafter referred to as the scheme)

Personal details:

Full name including title: Mrs. Lynne Bowers

Date of birth: 12 February 1949

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: Mulcolus Eowes Address:	Name: Address:
Proportion %	Proportion %
Name: Address:	Name: 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: 1 hours. Date: 01/10/16

Notes:

The member's estate cannot be nominated.