Nomination of beneficiary form

Scheme Name: MCL SSAS

Personal details: SIMON RAFIQ MARFANI
Full name including title: MR
Date of birth: 24/8/1967

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: MATTHEW ADAM MARFANI Address: Flat 23 Albert Place Aldsbury Proportion % 100%	Name: Address: Proportion %
Name: Address: Proportion %	Name: Address: 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: S.R. Marfani Date: 30/1/2017

Notes:
The member's estate cannot be nominated.
If the member does not complete a nomination form the death benefit would be payable to (or may be applied for the benefit of) such one or more of the member's dependants or named class as the nominated trustee decides, acting in accordance with the governing Trust Deed and Rules.