Nomination of beneficiary form

Scheme Name:
FUND
Personal details: Full name including title: MQ PAUL MICHAEL DAVEY Date of birth: 25.2.68

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: MISS ISABELLA DAVEY	Name:
Address: 25 CLAPPON CLOSE	Address:
CINENCESTER GL7 IWQ	
Proportion % 50	Proportion %
DOB: 12/11/06	DOB:
Name: MASTER ALEXANDER DAVEY	Name:
Address: 25 CLAPTEN CLOSE	Address:
CIRENCETTER GL7 IWQ	
Proportion % 50	Proportion %
DOB: 14/1/12	DOB:

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: 9/5/19

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.