

LAND ROVER PENSION SCHEME Death Benefit Expression Of Wish Form		
To: The Trustee of the Land Rover Pension Scheme		
(Please use BLOCK letters throughout this form)		
Surname:	Forename:	
NI Number:		
Payroll Number:	Date of Birth	DD/MM/YYYY
Declaration In the event of my death I would like the Trustee to consider making payments of Lump Sum benefits, due under the Scheme, to the following people:		
Name(s) Addre	ess(es)	Relationship to me (if any) %
For the purposes of the Data Protection Act 1998, by signing this Expression Of Wish Form you agree to your data being processed for the purposes of administering the Scheme and paying benefits under it. Unless you wish to keep your wishes secret until your death, you confirm that you have informed the above named beneficiaries of the processing by us, or on our behalf, of their data for the purpose of the Trustee exercising its discretion in relation to the payment of benefits.		
This form cancels any previously submitted expression of my wishes.		
Signed:	Date:	

Notes on completing the Form

You can indicate more than one beneficiary with a proportion of the total benefits for each, for example your spouse (60%) and your father (40%). When your circumstances change, simply complete a new form. The total of all percentages must be 100%

If you wish use a sealed envelope to keep your wishes secret until your death you may do so. Please complete the front of the envelope with your name, payroll number, and the words 'only to be opened in the event of my death' printed clearly in block capitals.

Please return the completed form to the Land Rover Pension Administration Team, Mercer, Post Handling Centre, St James's Tower, 7 Charlotte Street, Manchester, M1 4DZ.