

BAE SYSTEMS PENSION SCHEME - ALVIS BENEFITS
(referred to below as "the Scheme")

TO: The Trustees of the Scheme

Nomination form

I understand that this request is not binding upon the Trustees of the Scheme, but in respect of any lump sum benefit(s) arising from the Scheme upon my death, I would like the Trustees of the Scheme to consider making payment of such benefit(s) to the following person(s):

Question 1

Full Name(s)	Relationship to myself	Date(s) of Birth
(i)		
(ii)		
(iii)		
(iv)		

Address(es)

(i)
(ii)
(iii)
(iv)

1a) If your relationship is not a legal spouse but a partner it is important to answer the following questions in order to ascertain entitlement to benefit

(i) Do you and your partner live together		years
(ii) Is your partner partly or wholly financially dependent upon you		
(iii) Do you and your partner share finances		

1b) Proportion of benefit(s) to be payable (to be completed ONLY if more than one person is named in question (1))

(i)	(ii)
(iii)	(iv)

1c) Name and address of person/Trust who will act as Trustee of the benefit due to the intended beneficiary(ies) if he/she/they is/are under 18 years of age

Full Name	Relationship to myself
Address	

QUESTION 2

To assist the Trustees please indicate below:

If you are divorced

Date of divorce _____

2a) Any individual/individuals that are entitled to any interest in your estate as a result of a divorce settlement. Any individual/individuals towards whose maintenance or support you contribute/contributed.

Full Name(s)	Date(s) of Birth	Relationship to myself
(i)		
(ii)		
(iii)		
(iv)		

Address(es)
(i)
(ii)
(iii)
(iv)

2b) Name and address of Solicitor who acted on your behalf

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This form cancels any similar form that I may have submitted previously to the Trustees of the Scheme in connection with the payment of any lump sum death benefit(s) under the Scheme.

Full Name of Member (Block capitals)			
National Insurance No.		Date of Birth	
Employee No.			
Signature			
Date			

NOTES TO MEMBER

1) When completed this form should be returned to **BAE Systems Pension Fund Trustees Limited, Pensions Service Centre, PO Box 1194, Crawley, West Sussex, RH10 0FZ** for safekeeping, in a sealed envelope showing your name in block capitals, signature, date and National Insurance Number and signature of a Witness.

2) In the event of any change in your personal circumstances, it is your responsibility to see that any alteration in your wishes is made known to the Trustees of the Scheme by submitting a further form to them.

3) Any change(s) in the address(es) of the person(s) named in Questions 1 and 2 above should be notified to the Trustees of the Scheme without delay.

4) In certain circumstances (e.g. where the intended beneficiary is under 18 years of age) the Trustees of the Scheme may decide to pay all or part of the lump sum death benefit(s) to the Trustees of another trust or settlement established for the benefit of the intended beneficiary.

The Trustee will collect and process information about you that may be subject to data protection laws. For more information about how we use and disclose your personal information, how we protect your information, our legal basis to use your information, your rights and who you can contact, please refer to the relevant sections of our Privacy Notice at www.baesystems.com/en/privacy.