



# Nomination of Beneficiary Form

## Death in Service Lump Sum Life Cover

If you die while you are working for IMI, your dependants will receive a lump sum of five times your basic salary. You should complete this form to inform the trustee of the death in service scheme who to pay your benefits to in the event of your death, in accordance with the trust deed and rules.

The trustee will take your wishes into account when deciding who to pay the value of your benefit to. Please note although your wishes will be given due consideration they are not binding, and the trustee will have sole discretion to decide how any death benefit is distributed.

You can change or revoke your wishes at anytime by completing another form.

You should review your wishes from time to time and when there is a change in your personal circumstances.

Please complete this form in **BLOCK CAPITALS** and return it to your local HR contact.

### Your Details

Full Name:			
Date of Birth:		National Insurance Number:	
Name of Employing Company:			
Date Employment Commenced:			

### Beneficiaries

You should consider what you wish to happen if the beneficiary (or one of the beneficiaries) dies before you, for example 'my husband/wife but if he/she dies before me, to all of my children who are living at the time of my death, in equal shares.' Please write any instruction in the 'Further instructions' box.

Please ensure the percentages add up to 100%.

Full Name of Nominee:			
Home Address of Nominee:			
		Postcode:	
Relationship of Nominee:		Proportion:	%

Full Name of Nominee:			
Home Address of Nominee:			
		Postcode:	
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Full Name of Nominee:			
Home Address of Nominee:			
	Postcode:		
Relationship of Nominee:		Proportion:	%

### Further Instructions

For the purposes of the Data Protection Act 1998, by signing this 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.

### Expression of Wish

I wish the trustee of the scheme to consider paying the value of my death in service benefit to the beneficiaries shown in section 2 in the proportion(s) indicated. This form supersedes any earlier beneficiary nomination form I may have completed for this Scheme.

Your Signature:		Date:	
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This form is **NOT** for nominating who you would want to receive your pension pot if you are a member of the Mercer Master Trust – IMI Retirement Savings Plan. There is a separate form for this on [www.mercermoney.com](http://www.mercermoney.com)