

Scheme Name: DCL Section of the Dow Services UK Pension Plan

Expression of Wish form for death benefits

Your information

Surname	
Forenames	
Title	Mr / Mrs / Miss / Ms*
Date of birth/...../.....
Member reference	
National Insurance number	

I understand the lump sum amount is payable at the discretion of the trustees. I would like the money to be split as follows:

Name:	Relationship:
Address:	Date of birth:
	Proportion: %

Name:	Relationship:
Address:	Date of birth:
	Proportion: %

Name:	Relationship:
Address:	Date of birth:
	Proportion: %

Name:	Relationship:
Address:	Date of birth:
	Proportion: %

Make sure the total of the percentages amounts to 100%.

Continue on another form if necessary. Tick here if you have used another form

I'd like you to consider my wishes, which I've indicated above. But I understand the payment of benefits is at the trustees discretion and they won't be bound by my request.

I confirm that this form revokes and replaces any previous Expression of Wish that I may have made before the date shown below.

Your signature **Date**

You should fill out another Expression of Wish form if there's any change in your personal circumstances in the future.

(continued overleaf)

Expression of Wish form for death benefits (continued)

Aon will process your personal data for the purpose of providing you with your pension services on behalf of the Trustees, the data controller. Aon, in its capacity as data processor, will comply with the applicable legislation including any data protection legislation and the instructions from the Trustees. We refer you to the privacy notice of the Trustees or of your employer to inform you about the processing activities in relation to your pension benefits.