

Chatham Reliance House

www.osb.co.uk 776878 7E9I0 I

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To the Trustees of the Scheme Expression of wishes

NOMILATINAL JAHIM - TUNOL

Employee's name:

	to be paid to:-
me to which the discretionary provisions apply	In the event of my death I would like any benefit under the Schei

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Percentage:	Percentage:
Relationship*:	Relationship*:
Address: ::::::::::::::::::::::::::::::::::	Address:
Full name:	Full name:
Percentage:	Percentage:
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Address: 60 AMME OF CUEVES	Address:szabbA
MOM 1721MH HNINDS : DWEU INS	Eull name:

\* If not a relation please state briefly how the person is dependent on you.

exercise their discretions under the governing documents of the Scheme. I understand that the above indication of my wishes will be used only as a guide to the Trustees when they

Please see Staff Privacy Policy for details on how OSB processes your Personal Data

Je. 11. 20

Date