



Please complete this form if you wish to name one or more beneficiary who you would like to receive pension death benefits on your death.

Your Expression of Wishes can be changed at any time, by completing and submitting a further Expression of Wishes form.

### Part A Member Details

<b>@sipp Member Number</b>		
	<b>Mr/Mrs/Miss/Ms/Other</b>	<b>Surname</b>
<b>Permanent Residential Address</b>	<b>Forename(s)</b>	
<b>Telephone Number</b>	<b>Postcode</b>	
	<b>Mobile</b>	
	<b>Email</b>	

### Part B Beneficiary Type

<b>Individual(s) Beneficiary(ies)</b>	<input type="checkbox"/>	<b>Complete Part C</b>
<b>Trust Beneficiary</b>	<input type="checkbox"/>	<b>Complete Part D</b>
<b>Charity Beneficiary(ies)</b>	<input type="checkbox"/>	<b>Complete Part E</b>

## Part C Individual(s) Details

Address

Mr/Mrs/Miss/Ms/Other		Surname
Forename(s)		
Postcode		

Relationship

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% of Death Benefits

	%	Date of Birth			
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Address

Mr/Mrs/Miss/Ms/Other		Surname
Forename(s)		
Postcode		

Relationship

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% of Death Benefits

	%	Date of Birth			
--	---	---------------	--	--	--

Address

Mr/Mrs/Miss/Ms/Other		Surname
Forename(s)		
Postcode		

Relationship

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% of Death Benefits

	%	Date of Birth			
--	---	---------------	--	--	--

Address	Mr/Mrs/Miss/Ms/Other		Surname		
	Forename(s)				
	Postcode				
Relationship					
% of Death Benefits		%	Date of Birth		

## Part D Trust Details

Name of Trust					
Name of Trustees					
Trustees Address					
	Postcode				
% of Death Benefits		%	Date of Trust		

**Please note we recommend that you seek independent legal and tax advice as to the suitability of a trust for your purposes.**

## Part E Charity Details

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Name of Charity

Charity Registration No.

Charity Address

Postcode

% of Death Benefits

 %

Name of Charity

Charity Registration No.

Charity Address

Postcode

% of Death Benefits

 %

## Part F Member Declaration

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- I can confirm this is an expression of my wishes in relation to the beneficiary(ies) to be considered to receive any benefit payable under the @sipp scheme on my death
- For the purposes of allowing the scheme to pay drawdown to as wide a range of beneficiaries as possible, I nominate that any individual who is eligible to receive a lump sum on my death, may be offered drawdown as an alternative
- I understand that @sipp (Pension Trustees) Limited will pay due consideration to my wishes but will have absolute discretion as to the beneficiary(ies) and the benefits paid to each
- I understand that this expression of wishes will supercede any previous expression of wishes, and @sipp (Pension Trustees) Limited will pay due consideration to the most recent expression of wishes held by them
- I understand that my expression of wishes can be changed at any time.

Signature

Date

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