

NOMINATION FORM

Annuities – payment of value protection lump sums

To: Scottish Widows

YOUR DETAILS (PLEASE USE BLOCK CAPITALS)

Your name

Annuity number

Your National Insurance number

(Your National Insurance number can be found on a payslip or a P60, or on a tax return. If you can't find your National Insurance number, please call HM Revenue & Customs on **0300 200 3500**.)

Date of birth (DD MM YYYY)

I want to nominate the person/people listed below to receive any benefits from the annuity mentioned above.

I understand that Scottish Widows will consider my wishes but doesn't have to follow them.

Please consider the person/people listed below to receive death benefits in the percentages shown.

Full name	Relationship (if any)	Address	Percentage of benefits

This form replaces any previous forms for this annuity number. If your circumstances change and you want to update the beneficiaries, please submit a new form.

It's important to understand how we use your personal information. Please read our Privacy Statement at www.scottishwidows.co.uk/legalprivacy

Please return the completed form and any covering letter to Annuities, Scottish Widows, PO Box 24171, 69 Morrison Street, Edinburgh, EH3 1HL.

Signed

Date (DD MM YYYY)

