



**Nortel Networks UK Pension Plan
Member's nomination form**

Name: _____
Reference number: _____
National Insurance number: _____

Member's statement

I understand that the Trustees decide who to pay lump-sum death benefits to.

Please consider paying the benefits to the people named below.

This form replaces any previous statements I have signed. I understand that I have the right to change my nomination at any time.

Signed: _____ Date: _____

Print your name: _____

	Relationship to you	Share of benefit
Name of person: _____ Address: _____ _____	_____	_____ %
Name of person: _____ Address: _____ _____	_____	_____ %
Name of person: _____ Address: _____ _____	_____	_____ %
Total benefit		100%

- 1 The Trustees will keep the information on this form confidential.
- 2 Please keep this form up to date. Changes in your personal circumstances may affect your choices.
- 3 Please send the completed form to Nortel Networks UK Pension Plan, PO Box 545, Redhill, Surrey, RH1 1YX.