

IMPERIAL TOBACCO PENSION FUND

Death in Service Lump Sum – Expression of Wish Form

To: The Trustees, Imperial Tobacco Pension Fund
(Please complete in block capitals)

Members name

Place of employment

I wish the following person or persons to benefit from any lump sum payable on my death in service.

Beneficiary 1*

Full name

Relationship

Address

Proportion of benefits e.g. (whole/half)

Beneficiary 2*

Full name

Relationship

Address

Proportion of benefits e.g. (whole/half)

Beneficiary 3*

Full name

Relationship

Address

Proportion of benefits e.g. (whole/half)

Special comments which may be of assistance to the Trustees in the exercise of their discretion*.

I understand that this is only an expression of my wish, and is not binding on the Trustees and may at any time be revoked or revised by me in writing.

Data Protection

The Trustee of the Fund is a data controller in respect of your personal data for the purposes of data protection laws. Further information on how we handle your personal data is set out in our Privacy Notice. A copy of this was sent to Pension Fund members in May 2018 or you should have received one when you joined the Fund, if later. A copy of the Privacy Notice can be requested from the Pension Fund Office at:

Imperial Tobacco Pension Fund Office, PO Box 3242, Winterstoke Road, Bristol BS3 9GY
Email pension.enquiries@uk.imptob.com, Telephone: 0117 953 0000

The information which we collect about you in this expression of wishes form includes certain special categories of data (also sometimes known as sensitive personal data), namely information relating to your marital status and family / dependants. We will use this personal data for the purposes of deciding who will receive benefits in the event of your death. We may also need to share this personal data with the scheme actuary, legal advisors, insurers, benefits consultants, annuity providers and auditors ("Third Parties"). These Third Parties will use the personal data for the same purposes as us and will also be data controllers of it. You can find out the names of these Third Parties at any time by contacting the Pension Fund Office.

Both we and the Third Parties need your consent to collect, use and share your personal data for the purposes set out above. You are entitled to withdraw your consent at any time, and may do so by contacting the Pension Fund Office. If you withdraw your consent, we will pass the withdrawal to the Third Parties unless that is impossible or involves disproportionate effort. Further information about what happens if you withdraw your consent is set out in our Privacy Notice.

Please sign below to give your consent to the collection, use and sharing of your personal data as described above by the Trustee and the Third Parties.

Signature

Date

* continue over page, where necessary