

THAMES VALLEY POLICE DEATH BENEFIT SCHEME

Nomination Form: (To be completed by hand in block capitals in blue or black ink)

NAME, RANK AND NUMBER

I have read and confirm my agreement to all the rules of the Thames Valley Police Death Benefit Scheme. I am willing to contribute £2.00 (or such other sum duly set by the Management Committee) from my pay on the death of any member of the scheme, and for this money to be paid to my nominated beneficiary(ies) in accordance with the rules of the scheme.

I submit below the name, address and relationship of my nominee(s). I duly request that any monies that may be due from the Thames Valley Police Death Benefit Scheme be paid to them in full in accordance with the rules.

In the case of a nominee or nominees being under the age of 18 years, I nominate below a responsible adult capable of advising them in the best use of such monies received.

I agree to immediately notify the HQ Finance Department in writing of any alterations which may be necessary in the under-mentioned details, or if I voluntarily wish to resign from the scheme.

If there is more than one nominee the first or second nomination, please state how you wish the benefit to be divided, i.e. the percentage of the total benefit to be allocated to each nominee. Where more than one first nomination is made, clear instruction must be given as to the division of benefit should one of these nominees pre-decease you.

First Nominations(s) – Name (date of birth if under 18 years), address and relationship of person or persons nominated:

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Second Nominations(s) (To be actioned in the event of the prior death of the first nominee(s) – Name (date of birth if under 18 years), address and relationship of person or persons nominated:

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Responsible Adult – (Names and address – required if nominee(s) are under age of 18 years)

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Signature: **Date:**