

THE NOMINATION

To be completed by the member. Please use **BLOCK CAPITALS**, and complete in black ink.

In the event of my death, I would like the Trustee board to consider paying any lump sum payable under the Scheme Rules to the following:

Full name	Address	Relationship to you	Share*

* Please enter a fraction (1/2, 1/4 etc.) or a percentage (%). The shares must add up to 1 if using fractions or 100%.

I understand that my wishes are not binding on the Trustee board and I may, at any time, cancel or amend this nomination by submitting another Nomination Form.

I understand that the Trustee board and its advisers and administrators (as detailed in the Annual Report & Accounts) will need to process certain data about me. I further understand that this may include items categorised under the Data Protection Act 1998 as "sensitive data".

I accept that the Trustee board and its advisers and administrators, need this data to pay benefits. I agree to this processing taking place.

Signature	Date
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Please return the completed form to:

**British Steel Pension Scheme
Freepost RLXS-ZXKT-AUER
Glasgow
G2 7BW**

The Pensions Office will acknowledge receipt of this form. Please call 0330 440 0802 should you have any queries regarding the form.