

Your Nomination Form

For the Argos Section of the Sainsbury's Pension Scheme

As a member of the Argos Section of the Sainsbury's Pension Scheme, valuable benefits are payable on your death. These notes give a summary of your death benefits and some of the points you should consider when you complete the form.

If you haven't started to receive your pension a spouse's, civil partner's or dependant's pension may be payable.

If no pension is paid, a refund of contributions may be made.

If you die in retirement, a spouse's, civil partner's or dependant's pension and children's allowances are payable based on your pension before any exchange for cash or reduction for early retirement. If you die within the first five years of retirement, a cash lump sum equal to the unpaid balance of those five years' pension payments is also payable.

| | | | |
|---------------------------------|-----------|----------------|--|
| Your name: | | | |
| National Insurance (NI) number: | | Member number: | |
| Home address: | | | |
| | | | |
| | Postcode: | | |

Your Nominated Beneficiaries for any lump sum death benefits

| | | | |
|--------------------------|-------------|---|--|
| Full name of nominee: | | | |
| Home address of nominee: | | | |
| | | | |
| | Postcode: | | |
| | Proportion: | % | |

| | | | |
|--------------------------|-------------|---|--|
| Full name of nominee: | | | |
| Home address of nominee: | | | |
| | | | |
| | Postcode: | | |
| | Proportion: | % | |

continued overleaf



Sainsbury's

| | | | |
|--------------------------|-------------|---|--|
| Full name of nominee: | | | |
| Home address of nominee: | | | |
| | | | |
| | Postcode: | | |
| | Proportion: | % | |

| | | | |
|--------------------------|-------------|---|--|
| Full name of nominee: | | | |
| Home address of nominee: | | | |
| | | | |
| | Postcode: | | |
| | Proportion: | % | |

| | | | |
|---------------|-------------|--|--|
| Total: | 100% | | |
|---------------|-------------|--|--|

Pension

If you do not have a spouse or civil partner you can elect to nominate someone else to receive the dependant's pension. (Please note this is payable at the Trustees' discretion.)

| Name | Address |
|------|---------|
| | |

I confirm that in completing and signing this form I consent to my personal data being processed by the Sainsbury's Pension Scheme Trustee and on behalf of the Sainsbury's Pension Scheme Trustee by the Scheme Administrator and the Sainsbury's Pensions Department and its advisers for the purpose of administering death benefits payable under my membership of the Scheme.

You have a right to withdraw your consent given under this form at any time, although processing by the parties named above after you give your consent but before you withdraw it will be lawful. If you would like to withdraw your consent please confirm this by emailing pensions@sainsburys.co.uk or by confirming in writing that you are withdrawing your consent to the address below:

Sainsbury's Pensions Department, 33 Holborn, London EC1N 2HT.

This nomination form replaces any previous forms I may have completed.

I understand that this is only an expression of wish, which is not binding on the Trustee and which may at any time be revoked or revised by completing a further nomination form.

| | |
|---------|--|
| Signed: | |
| Dated: | |

Return this form to:

Sainsbury's Pensions Department
 33 Holborn
 London
 EC1N 2HT