

BENEFICIARY DESIGNATION FORM

I, _____ of _____ hereby nominate the persons below as my designated beneficiary(ies) to receive a benefit payable under BPM Personal Pension (the "Scheme") on my death. My benefit under the Scheme shall be allocated in the proportions indicated below.

1. BENEFICIARY SURNAME:		FIRST NAME:		MIDDLE NAME:	
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF BIRTH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y		RELATIONSHIP:	
TAXPAYER REGISTRATION NO.:		NATIONALITY:		MARITAL STATUS: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Common-Law	
SHARE PERCENTAGE (%):		TELE:		EMAIL:	
ADDRESS:				OCCUPATION:	
2. BENEFICIARY SURNAME:		FIRST NAME:		MIDDLE NAME:	
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF BIRTH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y		RELATIONSHIP:	
TAXPAYER REGISTRATION NO.:		NATIONALITY:		MARITAL STATUS: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Common-Law	
SHARE PERCENTAGE (%):		TELE:		EMAIL:	
ADDRESS:				OCCUPATION:	
3. BENEFICIARY SURNAME:		FIRST NAME:		MIDDLE NAME:	
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF BIRTH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y		RELATIONSHIP:	
TAXPAYER REGISTRATION NO.:		NATIONALITY:		MARITAL STATUS: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Common-Law	
SHARE PERCENTAGE (%):		TELE:		EMAIL:	
ADDRESS:				OCCUPATION:	

TRUSTEE SURNAME:		FIRST NAME:		MIDDLE NAME:	
DATE OF BIRTH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y		RELATIONSHIP:	NATIONALITY:	TAXPAYER REGISTRATION NO.:	
TRUSTEE ADDRESS:			SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		TELE:
TRUSTEE EMAIL:			OCCUPATION:		MARITAL STATUS: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Common-Law

Please read notes overleaf before signing the form.

Member Signed Witness Signed

...../...../.....
DATE : dd.mm.yy

Please read notes below:

1. The term “Beneficiary” describes any person who is entitled or prospectively entitled to receive benefits under the Scheme.
2. In Jamaica nominations are legally binding. Consequently your Nominated Beneficiary is entitled to retain any amounts paid to him for his own use and benefit. Your nominations would override any alternative provisions which you may have made under your last will and testament or claims by your statutory next of kin if you die intestate, i.e. without making a will.
3. You may change your Beneficiary at any time by completing a form issued by BPM Financial Limited (BPM) for the purpose of changing your Beneficiary. Changes in Beneficiary shall take effect on the date the notice of change is received by BPM.
4. Benefit payment(s) to any named Beneficiary under the Scheme shall be in accordance with the designation in force at the date of your death and shall be made upon receipt of proof of your death and such other information required by BPM.
5. You may designate more than one person as your Beneficiary. You shall state the share that each Beneficiary is entitled to receive. If no share is stated then all Designated Beneficiaries shall share the benefit equally.
6. In the event that a Beneficiary is a minor, you shall authorize persons to act as Trustees to receive the benefit on behalf of such minor and to hold same for the benefit of such minor.
7. If a Designated Beneficiary dies in your lifetime, you will be entitled to nominate a new Beneficiary in place of the deceased Beneficiary. Failing such a nomination, the surviving Beneficiaries, if any, shall take in equal share, the share to which the deceased Beneficiary would have been entitled to receive had he survived you. If there is only one surviving Beneficiary he shall be entitled to receive the whole amount.
8. If no nomination is made or if no Designated Beneficiary survives you, all payments shall be made to your legal personal representatives.