

MITCHELLS AND BUTLERS PENSION PLAN (THE PLAN): DEATH BENEFIT NOMINATION FORM

Although it's not something any of us like to think about, it's important you let us know who you would like to receive any benefits which are payable from the Plan after you die.

We recommend you read this information about your benefits carefully before completing this Nomination form.

The value of these benefits will depend, amongst other things, on whether or not you're a member of DC Choice. You can find more information about the benefits that apply to you in the DC Choice Summary Guide, which is available under Guides at: <https://www.mbplcpensions.com/dc-choice/library>

Completing this Nomination form will let the Trustee of the Plan (the Trustee) know who you'd like these benefits to be paid to. Please complete the form and return it by email to pensions@mbplc.com or by post to **Pensions Department, Mitchells & Butlers plc, 27 Fleet Street, Birmingham B3 1JP.**

You can change your nomination at any time by completing and returning a new form. Submitting a new form will replace any previous nomination(s) you may have already made.

Please note the Trustee is not bound by your wishes but will always take them into account when making its decisions.

SECTION A: YOUR DETAILS

Title:	<input type="text"/>	Date of birth:	<input type="text"/>
Full name:	<input type="text"/>		
Employee ID No:	<input type="text"/>		
Telephone:	<input type="text"/>		
E-mail:	<input type="text"/>		
Employing company:	<input type="text"/>		
Location:	<input type="text"/>		

SECTION B: YOUR NOMINATION

Please provide the details of the recipient(s) you'd like to nominate to receive any benefits. You can nominate more than one person (known as a beneficiary), but please ensure the percentages add up to 100%. If you would like to nominate more than five beneficiaries, please contact us using the details provided above.

Forename(s)	Surname	Relationship	Proportion of benefits (%)	Address

SECTION C: YOUR AUTHORISATION

I understand this Nomination form does not limit the decision of the Trustee in awarding payment of any death benefits. The Trustee will normally follow your instructions as detailed on your most current Nomination form, but they will also consider any changes to your circumstances since you completed the form.

I consent to the Trustee processing all of my personal data provided by or on behalf of me for the purpose of holding the information which I have provided in this Nomination form and providing benefits on my death. I agree the Trustee may share this personal information with such other parties as it considers necessary to fulfil the purpose, which may include Mitchells & Butlers plc, their advisers, or the Trustee's advisers. Details of the third parties with whom sensitive personal data may be shared are set out in the Trustee's data protection notice, which can be obtained at www.mbplcpensions.com/privacy-notice

I am aware that I have the right to withdraw my consent to the processing of my sensitive personal data at any time by writing to you. However, I acknowledge the Trustee may consider it has other lawful grounds for processing that data in any event but, if it doesn't, this may mean it is not possible for the Trustee to fulfil the purpose referred to above.

I note that I can obtain further information on data protection in general from the ICO at <https://ico.org.uk/>

This form overrides any previous Nomination form I have completed.

Member's signature:	<input type="text"/>
Date signed:	<input type="text"/>

Please return this form by email to pensions@mbplc.com or by post to **Pensions Department, Mitchells & Butlers plc, 27 Fleet Street, Birmingham B3 1JP.**