



SUSSEX POLICE FEDERATION
GROUP INSURANCE SCHEME



BENEFICIARY NOMINATION FORM

Members of the Federation group insurance scheme are requested to nominate the persons they wish to receive the money in the event of their death. Scheme trustees are not bound to follow the nomination, but will take it into account.

This form allows you to name the individuals that you would like to be your beneficiaries.

Officer Name Date of Birth Warrant No.

Address:

In the event of my death, my nominated beneficiaries are:

Title and Name	Address (if different from above)	Date of Birth	Relationship to Officer	% of Benefit
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Officer signature Date of change of Beneficiary.....

To determine if you are paying for Spouse/Partner cover please check your payslip, where it will show as 'Accident' and a deduction of £25.50 (or £12.80 - recruit constable) – You have spouse/partner cover OR 'Accident' and a deduction of £20.45 (or £10.25 - recruit constable) – Your spouse /partner is NOT covered.

If you are also paying into the scheme that provides for a benefit payment in the event of the death of your SPOUSE/PARTNER, please ask them to complete and sign the section below. It is acceptable for the Officer above to be named for all or part of the benefit.

In the event of spouse/partner death, my nominated beneficiaries are:

Title and Name	Address (if different from above)	Date of Birth	Relationship to spouse or partner	% of Benefit
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Spouse/Partner Signature Date of change of Beneficiary

(Only required if spouse/partner is insured)

The information supplied on this form will only be used for guidance of the trustees in the event of death. It may be stored electronically and by submitting the form you consent to this. The form is not part of any insurance policy or documentation. It is your responsibility to ensure that in the event of your circumstances or wishes changing, you keep the information up to date.

Please return to the Federation Office