

Did you know you can advise your bank details and view your shareholding online? Find out more by visiting www.shareview.co.uk

This form must be completed in BLOCK CAPITALS and in black ink. Fields marked * must be completed if you are not entering information in any of the non compulsory fields please leave them blank and do not cross them through.

Dividend payments to Republic of Ireland domiciled bank accounts - please complete overseas payment mandate.

Payments Direct to your Bank/Building Society Account ++ Shareholder reference *

Company * Step 1 Please enter the company nam shareholder reference (if known). Step 2 Please enter Shareholder f name

Step 3

Step 4

Step 5

company name and shareholder reference (if known).															
Step 2 Please enter Shareholder full name														*	
Step 3 Please enter current House or Flat number and Postcode	House Num	ber *					Posto	code	*						
Step 4 Please provide details of your bank or building society account	Sort code * (UK bank branches only)							Account number * (£ sterling accounts only)							
	-	-	-]										
		Building society reference or roll number (Maximum of 18 characters)													
	(Please ente applicable.							l nur	nber,	, or le	ave l	blank	if no	t	
Step 5 Please read then sign and date below. All registered holders must sign to confirm this instruction.	Please forward payable to a building soci from time to Financial Se a Company This instruct within a Divi an instructio	me/us in re iety, or to so time reque ervices Limi Sponsored tion will not idend Reinv	espect of uch other est. Comp ted's (wh Nominee override /estment	f any sha r branch o pliance wi ere share e Service) any existi Plan or S	res or f the c ith this s are liabilit ing ins	stock storgani s requi held t ty in re structio	k held, isation a lest wil by Equi espect on to re	, to t as th II disc initi (of su eceiv	the a ne bar charg Corpo uch di re sha	bove nk or l ge the prate l ividen ares ra	nomi buildi Com Nomi ids or ather	inated ng soo npany' nees l other than c	l banl ciety i 's/Equ Limite ' moni cash (k or may uiniti ed in ies. (e.g.	
	Your signatu	ure(s) *				Г									
	Signature 1						Sig	Signature 3 (if applicable)							
	Signature 2 (if applicable)						Się	Signature 4 (if applicable)							
	Today's date	∍* / M N	/ /	ΥY	Y	Y									
Step 6 If signing as a Power of Attorney or other authority														3061	

Please return this form to Equiniti at the address above.

 \sim

Equiniti Limited and Equiniti Financial Services Limited are part of the Equiniti Group. Their registered offices are Aspect House, Spencer Road, Lancing, West Sussex BN99 6DA. Company share registration, employee scheme and pension administration services are provided through Equiniti Limited, which is registered in England & Wales with No. 6226088. Investment and general insurance services are provided through Equiniti Financial Conduct Authority Financial Conduct Authority

+

name here

please print your full