

Greencore Life Assurance (Death in Service) Benefit

EXPRESSION OF WISH

Subject to underwriting requirements of our relevant insurance provider you are entitled to participate in the Death in Service Benefit Scheme. In the event of death during employment, the company will pay a lump sum equal to 2 times your annual salary.

Full Name: (Block Capitals)	
Payroll Number:	
Site/Business Team:	

I revoke any Nomination Form/Expression of Wish Form previously signed by me.

In the event of my death whilst a colleague at Greencore, I wish payment to be made to the following person(s), in the proportions as indicated of any lump sum death benefit.

Nominee(s)		Proportion (%)	Relationship to me
Name	Address		
		100 %	

I fully appreciate that the above is merely an expression of my wishes, which I may alter at any time.

I also acknowledge that you are not bound to act in accordance with this expression. I request you to take note of my wishes as set out above.

Employee Signature:	
Date:	