

Equiniti Aspect House Spencer Road Lancing West Sussex BN99 6DA

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.

If there are any unclaimed payments on this holding (e.g. dividends) we will re-issue them to the account you give below and may deduct a fee. The fee will depend on the value of the payment(s) and is quoted on the 'Request a dividend reissue' section of **help.shareview.co.uk**

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

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Step 1 Please enter the company name and shareholder reference (if known).	Company								Sila	renor	uer re	erere	ce			
Step 2 Please enter Shareholder full name																*
Step 3 Please enter current house or flat number and postcode	House Nu	mber *							Pos	tcode	*					
Step 4 Please provide details of your bank or building society account	Sort code * (UK bank branches only)								Account number * (£ sterling accounts only)							
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	Building so	ociety refe of 18 chara		or roll	num	ber	!	•								
·	(Please er applicable									oll nu	mber	, or le	ave k	olank	if not	ł
Step 5 Please read then sign and date below. All registered holders must sign to confirm this instruction.	Please forward until further notice, all dividends or interest that may from time to time become payable to me/us in respect of any shares or stock held, to the above nominated bank or building society, or to such other branch of the organisation as the bank or building society may from time to time request. Compliance with this request will discharge the Company's/Equiniti Financial Services Limited's (where shares are held by Equiniti Corporate Nominees Limited in a Company Sponsored Nominee Service) liability in respect of such dividends or other monies. This instruction will not override any existing instruction to receive shares rather than cash (e.g. within a Dividend Reinvestment Plan or Scrip dividend programme). If you wish to revoke such an instruction, you must do so in writing.															
ſ	Your signa	ature(s) *					7									
	Signature 1								Signature 3 (if applicable)							
	Signature 2 (if applicable)								Signature 4 (if applicable)							
	Today's date * D D / M M / Y Y Y Y															
Step 6 If signing as a Power of Attorney or other authority please print your full name here																23061
	Please	e return th	is forr	n to E	quir	niti at	the a	ddre	ss ab	ove.						