

Shareholder Helpline: 0870 702 0000

TextPhone 0870 702 0005  
You can check your holding at  
[www.computershare.com](http://www.computershare.com)

## Dividend Mandate Form

**Kindly Note:** This form is issued only to the addressee(s) and is specific to the class of security and the unique designated account printed hereon. This personalised form is not transferable between different (i) account holders; (ii) classes of security; or (iii) uniquely designated accounts. The issuer and Computershare accept no liability for any instruction that does not comply with these conditions.

Shareholder Reference No.

Company Code  
(if known)

Name of Company in which shares/stock are held

### Full Names of all Registered Holders, Executors or Administrators required: -

	Title	Forename(s) in full	Surname
Name (1)	<input type="text"/>		
Name (2)	<input type="text"/>		
Name (3)	<input type="text"/>		
Name (4)	<input type="text"/>		
Designation (if any)	<input type="text"/>		

House  
Number

Post Code

Address  
Details

Daytime contact number (including area code)

**Please turn the page and complete all the sections overleaf.  
Both pages must be completed before your request can be processed.**

**Bank / Building Society details : -**

Account Number	<input type="text"/>	Building Society Reference/ Roll Number	<input type="text"/>
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Sort Code	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name	<input type="text"/>
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+ Address	<input type="text"/>	+
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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 following 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. Your compliance with this request will discharge the Company's liability in respect of such dividends or other monies.

Computershare cannot accept responsibility in the event that the sort code or account number quoted by you is incorrect.

The implementation of **this** mandate will **NOT** override any existing SCRIP Dividend mandate or Dividend Reinvestment Plan mandate. If you wish to revoke any existing SCRIP Dividend mandate or Dividend Reinvestment Plan mandate, you must do so in writing.

**Signatures of all Registered Holders, Executors or Administrators required: -**

In the case of Corporate Bodies, signatories should state their representative capacity (e.g. Director or Secretary).

(1)	<input type="text"/>	Capacity	<input type="text"/>
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(2)	<input type="text"/>	Capacity	<input type="text"/>
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(3)	<input type="text"/>	Capacity	<input type="text"/>
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(4)	<input type="text"/>	Capacity	<input type="text"/>
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+ Date	<input type="text"/>	+
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**Kindly note that it is not necessary to return your share certificate(s) or account statement for amendment**

**Please return this form to: -  
Computershare Investor Services PLC, PO Box 82, BRISTOL BS99 7NH**

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