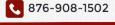
## FHC RETIREMENT SCHEME PENSIONER TRUSTEE NOMINATION FORM

Ensure that this form is completed in CAPITAL LETTERS.

FIRST NAME:	LAST NAME:	
CONTACT INFORMATI	ON OF THE NOMINEE/CANDIDATE	
ADDRESS:	TEL:	EMAIL:
NAME OF NOMINATO	·R	
FIRST NAME:	LAST NAME:	A/C# OR TRN:
SIGNATURE:		

Please submit to any branch of First Heritage Co-operative Credit Union Limited by Friday November 1, 2024



DATED THE \_\_\_\_\_



fhcinvestmentadvisors@fhccu.com

DAY OF



2024