

PROCTER AND GAMBLE UK SHARE INVESTMENT SCHEME

Application/Amendment Form

NEW MEMBER

EXISTING MEMBER
PERSONAL DATA CHANGE

EXISTING MEMBER
OTHER INSTRUCTIONS

Please tick (✓) the relevant box(es)

PART 1 PERSONAL DETAILS (Please use Block Capitals)

(If you are changing your name, address or bank account, please indicate this by ticking (✓) the box at the top of this form)

Mr/Mrs/Miss/Ms/Other First Name

Surname Previous Surname

Address

Postcode

Personal Identification Number (See centre of payslip) National Insurance Number

PART 2 CONTRIBUTION FOR SHARE PURCHASE (Complete one or both of the following contribution methods)

a. I would like to make a lump sum contribution of £ paid by Cheque Number

Note: Cheques must be received in IRG's office (see address below) by the 20th of the month for use in the following month.
Cheques should be made payable to 'IRG Trustees Ltd/P&G SIS'.

b. I would like to contribute regularly by Standing Order £ (Please tick the appropriate box below)

Monthly Bi-Monthly Quarterly 6-Monthly Yearly

Note: Limits to contributions are minimum £10.00 for each payment.

PART 3 SALE/TRANSFER OF SHARES * Delete whichever does not apply

a. Please sell*/transfer* to my name (Letters) () (Numbers) of my shares in the scheme.

This sale is to take place:- immediately or when the Trustees next buy (Please tick the appropriate box)

+ There is a sale charge of £15.00, but if the share sale takes place immediately, then you pay the greater of £15.00 or the brokers fee for open market sale.

b. Please transfer (Letters) () (Numbers) shares from the Matched Savings Share Purchase Plan to the Scheme.

PART 4 DIVIDEND REINVESTMENT OR PAYMENT (Choose a or b below)

a. Are dividends to be re-invested from the Matched Savings Share Purchase Plan and this Scheme? Yes No

b. Are dividends to be paid to a bank account? (If yes, please complete Part 5 below.) Yes No

PART 5 DETAILS OF BANK ACCOUNT FOR PAYMENT OF YOUR DIVIDENDS

Name & Address of Bank

Postcode

SORT CODE ACCOUNT NUMBER

ACCOUNT NAME TYPE OF ACCOUNT DEPOSIT / CURRENT

PART 6

I understand that the Administrators will act in accordance with these instructions at the earliest opportunity.
I agree to be bound by the rules of the Plan.

Signature of Employee

Date