Withdrawal Form

This form is for a part or full withdrawal of funds from an existing account.

Please complete this form in **BLOCK CAPITALS** and return to: IFSL, PO Box 13586, Chelmsford, CM99 2GS, or to your financial adviser.

Section A - Holder Details Please complete parts 1 or part 2 in full as this is mandatory

Part 1 – Individual Investors					
Title Surname	First name(s)				
Permanent residential address					
Postcode	Country				
Telephone number	Email address				
Date of birth	National Insurance number				
Existing account number					
Part 2 – Corporate Investors including charities	and trusts				
Legal entity name					
Correspondence address					
Postcode	Country				
Registration number	Registration body				
Telephone number	Email address				
Primary contact name	Position				
Existing Account number					
Section B - Financial Adviser's Details To b	e completed by your financial adviser if applicable				
Details provided here must match the details already registe then a separate written instruction must be submitted along	ered against the account. If the financial adviser has changed gside this form.				
Adviser's name/firm Adviser's firm stam					
Adviser's email address					
FCA number					
Agency code (if known)					
Please tick all which apply					
Cancellation rights apply Discretionary business	Advised business				
Portfolio management se	arvicos				

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		ther full or part		
Fund name	ISIN (as shown in KIID)	Full withdrawal	Part wit	thdrawal
		Tick below	Amount, or	Number of units/shares
1.			£	
2.			£	
3.			£	
4.			£	
5.			£	
	TOTAL		£	

Your fund(s) cannot fall below the minimum investment amount. Please refer to the fund prospectusw for details of the minimum investment amounts, this can be found at **www.ifslfunds.com/literature**. The Withdrawal Form must be received by IFSL no later than the relevant cut-off point for redemption as specified in the relevant fund(s) prospectus.

Section D - Payment Details

Please provide bank details of where you wish the withdrawal to be paid to:

When providing bank details please ensure these are accurate as we cannot accept responsibility for payments made to an incorrect account. Payment can only be made to an account holder.

Ν	Name	of b	ank/	build	lina s	society

Name of account holder	Ν	lame	of	account	holder	
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Bank account number	N N	N	N	N	N	N	N	Sort code	Χ	Х	-	Х	Х	-	Х	X	
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Roll number/building society reference

Please tick this box if you make a regular monthly investment into your account and would like to cancel your Direct Debit.

Section E - Privacy Notice

We're committed to processing the personal data that you provide to us in line with the latest data protection and data privacy legislation in force within the United Kingdom. We'll use your information in order to provide the service detailed in this Application Form and to administer your investments, communicate with you and provide information on our products and services when you request it, to meet our legal obligations and for the purposes of fraud prevention.

Our full Privacy Notice

It's important that you read our full Privacy Notice, which explains how the personal information you give us will be used. The Privacy Notice can be found on our website at **www.ifslfunds.com**, or you can ask us for a copy.

Section F - Corporates - Authorised Signatories Not applicable for individual investors

Please provide an original or certified copy of your most up to date signatory list where a holder ia a company.

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WITHDRAWAL FORM 2 OF 3

Section G - Declaration Please ensure that you read and sign this section as this is mandatory

- I/We wish to make the above mentioned withdrawal(s) from my existing investment with IFSL
- I/We have reviewed the up-to-date version of the relevant fund(s) prospectus for the dealing deadlines for the processing of redemptions, which I/we understand is available from IFSL and also at www.ifslfunds.com
- I understand that, for ISA accounts, any withdrawal(s) made cannot be subscribed back into the ISA without affecting the annual subscription limits
- I have read the IFSL Privacy Notice concerning the use of my personal data

Signed by

Client signature

Client signature

Full name

Full name		
Client signature	Dat	te DDMMMYYYYY
Full name		
Client signature	Dat	te DDMMMYYYYY
Full name		

Date

D D M M Y Y Y

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WITHDRAWAL FORM 3 OF 3