

LIONTRUST WITHDRAWAL FORM



Please complete, where relevant, All sections of this Withdrawal Form either electronically or by hand in BLOCK CAPITALS and black ink. Please note that all signature sections will need to be signed by hand. Please return the completed form to: Liontrust Customer Services Team, PO Box 373, Darlington, DL1 9RQ.

If you have any queries, please contact our Customer Services Team:

Telephone: 0344 892 0349 (overseas +44 203 528 4110)*

Facsimile: 020 7964 2562 (overseas: +44 207 964 2562)

E-mail: liontrustadmin@bnymellon.com Website: www.liontrust.co.uk

For overseas and UK tracked / signed for mail:

Liontrust Fund Partners LLP, 373/9RQ, 11B Lingfield Close,
Lingfield Point, Darlington, DL1 1AX

*Monday to Friday 9.00am–5.00pm; calls may be recorded. Calls are free from landlines and mobiles within the UK. Authorised and Regulated by the Financial Conduct Authority.

1 PERSONAL DETAILS

You must complete this section. All fields within this section are mandatory, your withdrawal form cannot be processed without this information.

ACCOUNT NUMBER (IF KNOWN):			<input type="text"/>
FIRST HOLDER:	<input type="text"/>	ADDITIONAL HOLDER(S):	<input type="text"/>
TITLE (MR / MRS / MISS / OTHER)		SURNAME	FORENAMES (IN FULL)
<input type="text"/>		<input type="text"/>	<input type="text"/>
FULL PERMANENT ADDRESS			
<input type="text"/>			
TOWN / CITY		POSTCODE	
<input type="text"/>		<input type="text"/>	

Additional holders (if applicable)

FULL NAME	<input type="text"/>
FULL NAME	<input type="text"/>
FULL NAME	<input type="text"/>

2 YOUR INSTRUCTION

You must complete this section. All fields within this section are mandatory, your withdrawal form cannot be processed without this information.

a) ISA Investments

I WISH TO SELL 100% OF MY ISA HOLDING OR *I WISH TO SELL PART OF MY ISA HOLDING

Please select fund(s) and amount.

FULL NAME OF FUND(S)	SHARES TO BE SOLD	AMOUNT (£)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

* If this withdrawal results in your holding falling below the minimum balance set out in the prospectus, then we reserve the right to sell the balance of your holding at the next available price.

2 YOUR INSTRUCTION (CONTINUED)

b) Non-ISA Investments

I WISH TO SELL 100% OF MY/OUR HOLDING HELD OUTSIDE AN ISA OR *I WISH TO SELL PART OF MY/OUR HOLDING HELD OUTSIDE OF AN ISA

Please select fund(s) and amount.

FULL NAME OF FUND(S)	SHARES TO BE SOLD	AMOUNT (£)

* If this withdrawal results in your holding falling below the minimum balance set out in the prospectus, then we reserve the right to sell the balance of your holding at the next available price.

3 REGULAR SAVER (IF APPLICABLE)

I WISH TO CONTINUE MY DIRECT DEBIT FOLLOWING THIS WITHDRAWAL? YES NO*

* Please note at the time of receiving your instruction your Direct Debit collection may still be in progress. It may therefore take up to 10 days before we sell the remaining balance.

4 PAYMENTS TO YOU

To pay direct to your bank account verification is required, unless we have paid you previously to this account. If you do not complete this section or fail to provide verification, we will send your proceeds via cheque. Please note this must be your own account, we are unable to make third-party payments.

ACCOUNT HOLDER'S NAME:

ACCOUNT NUMBER

SORT CODE

To verify your bank account, we require one of the following:

- A voided cheque; or
- An original bank statement detailing your address (no older than 3 months); or
- A Giro or paying in slip for the bank account; or
- A certified copy of your bank statement (no older than 3 months).

5 DECLARATION

This section must be completed by hand.

I/We hereby authorise Liontrust Fund Partners LLP to sell the amount stated above from my/our account, in accordance with the terms and conditions of the investment and authorise payment.

Signature of all registered holders

FIRST HOLDER SIGNATURE:

ADDITIONAL HOLDER SIGNATURE:

CAPACITY*:

CAPACITY*:

DATE:

DD / MM / YYYY

DATE:

DD / MM / YYYY

ADDITIONAL HOLDER SIGNATURE:

ADDITIONAL HOLDER SIGNATURE:

CAPACITY*:

CAPACITY*:

DATE:

DD / MM / YYYY

DATE:

DD / MM / YYYY

*When corporate bodies are withdrawing shares, this form should be completed by the company and signed by two directors or a director and a secretary, stating capacity, or authorised signatories. Alternatively, any other authorised signatories must state their capacity confirmed by a stamp or seal.