Investment Funds Transfer Authority

cofunds
the independent fundmarket

Please note that a separate authority will be required for each Fund Manager. If transferring more than one Fund Manager, please request more Transfer Authority Forms from your Intermediary.

Please complete all details requested.

Existing Cofunds Client Reference:

Name of Fund Manager

Address

Postcode

Account reference with the above Fund Manager

Client Name(s) as they are registered with the above Fund Manager or fund supermarket. Please print in BLOCK CAPITALS.

Primary Holder

Address of Primary Holder

Postcode

Second Holder

Third Holder

Fourth Holder

I/We hereby transfer my/our entire holdings in the funds listed below to Cofunds Nominees Limited, with immediate effect. Please forward confirmation to **Cofunds Limited, PO Box 1103, Chelmsford CM99 2XY.**

I/We also authorise Cofunds to submit all information contained in this Transfer Authority to the Registrar of the Fund Manager named opposite and request that the register be updated as necessary to give effect to this transfer.

I/We confirm that the re-registration of the funds listed will not change the beneficial ownership from (or among) the current holder(s).

I/We confirm that this transaction is exempt from SDRT by virtue of paragraph 6 of Schedule 19 of the Finance Act 1999.

Signature(s) Corporate investors please state capacity of signatory and sign under the company seal)

Primary Holder Signature X Date

Capacity (if applicable)

Second Holder Signature Date

Capacity (if applicable)

Third Holder Signature Date

Capacity (if applicable)

Fourth Holder Signature Date

Capacity (if applicable)

Please note: All joint holders must sign the form.

1 Designations

Please provide any current designations.

Please note that a separate authority form will be required for each designated holding.

2 Details of Funds to be Re-registered

Fund Manager and Fund Name	Type of Unit/Share (Delete as appropriate)*	Share Class
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	
	ACC / INC	

*If you do not specify ACC or INC in this column, Cofunds will not be able to process your application. If you have chosen income units/shares, please ensure you complete Section 5 of the Investment Funds Transfer Application Form if you wish the income to be paid to you.