

TRANSFER AUTHORITY FORM

Insert your address here

Insert the contact's name & address of the

organisation that your account is being transferred

from

(Insert date here)

Dear *(insert contact name)*

Re: Transfer of our Portfolio(s) *(insert your account number(s) here)*

Please accept this letter as formal notification of my/our wish to close my/our account(s) as detailed below and transfer the holdings to King & Shaxson Asset Management Limited.

I/We therefore give you authority to disclose full details of my/our account(s), including information such as holdings and CGT position (realised and unrealised) in order to affect the transfer.

Details of the accounts I/we wish to transfer can be found below:

Name of Fund Manager	
Fund Manager Details	<i>Email:</i> <i>Phone No:</i>
Account reference(s)	
In specie or cash	
Value	
Notes regarding transfer	

We provide permission to liaise with the following contacts regarding this transfer:

Contact Person	Tel No	E-mail	Position
Ruemu Abutoh	020 7426 5985	ruemu.abutoh@kasl.co.uk	Asset Management Assistant
Pershing Securities Ltd*	Multiple	Multiple	Agent for King & Shaxson Asset Mgt
K&S Support Team	020 7426 5960	ethical@kasl.co.uk	General Support

** There may be occasions whereby the agent of King & Shaxson Asset Management Limited may need to contact yourselves during the transfer process*

Yours faithfully,

Signature of 1st
account holder

Signature of 2nd
account holder

Signature of 3rd
account holder

Signature of 4th
account holder

Print name of 1st
account holder

Print name of 2nd
account holder

Print name of 3rd
account holder

Print name of 4th
account holder