


1
CLIENT INFORMATION (Please fill out in block capitals)

Investment account number/Portfolio number

Name of the 1st Investor

Name of the 2nd Investor

Street, House number

Post code, City/Town

Telephone/Fax

Email

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CLIENT APPLICATION (Please place a cross next to your desired option)

☐ Set up ☐ Change ☐ Termination of the withdrawal plan

Fund number or ISIN	Payout interval	Withdrawal amount in payout currency ²	Shares	Payout currency ³	Start/end of payout ⁴ (MM/YYYY)
1. <input type="text"/>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please withdraw the shares as requested above from my/our investment account/portfolio and transfer the proceeds to the bank whose details are provided under item 3.

¹ For a withdrawal plan, the shareholder must hold investment shares with an equivalent value of at least EUR/USD 25,000.

² Minimum withdrawal amount: EUR 100 or USD 100. Please do not enter decimal places.

³ Any necessary conversion will be performed at the expense of the shareholder.

⁴ Withdrawals will generally be made on the 25th day of each month. If the application is received after the 20th of any month, the Savings Plan will be implemented on the second designated contribution date after that.

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BANK DETAILS

Please note that in case of applications for the sale of shares for which payment by bank transfer is requested, the bank transfer will generally be completed only if the name of the shareholder's account is in the same name as that of the recipient account at the bank. In case of accounts/portfolios with more than one shareholder, the payout will only be made in favour of a recipient account that is in the name of at least one of the shareholders. It is therefore urgently recommended that the investors state an account that corresponds to the aforementioned requirements. Otherwise, delays may occur in payment.

We would be pleased to provide you with information on other payout options. You can obtain information free of charge from our service team by calling the free phone number below.

Name of 1st account holder

Name of 2nd account holder

Currency

IBAN

BIC

Bank

City/Town

4
SIGNATURE(S) (Accounts and portfolios with joint authorisation require the signatures of all shareholders)

Investment broker no.:

Optional

Signature and stamp

X

Date/signature of 1st current account holder
1st custodian

X

Date/signature of 2nd current account holder /
2nd custodian