/06.18/v1.0

FundsNetwork online letter of authority capture form

Please note: This form is available for use between advisers/intermediaries and their clients. It is not an application form and should not be sent to FundsNetwork.

FundsNetwork

1 Client details		
tle		
urname		
Client Name		
lient Name		
Address		
ostcode	Client account number (s)	
2 Authority to tr	ansfer	
		ateriants to the fallowing IFA manage(a)
	lity to transfer the servicing of above inve	strients to the following IFA person(s):
Name or Company name		
Address		
lantan da	Hairma Advisor Number	ECA number
ostcode	Unique Adviser Number	FCA number
		renewal commissions. Please also provide
copies of future corresponding	ence and any information they require re	garding my existing account(s).
3 Declaration a	nd signature	
The information given by mo		and I will inform Fidelity immediately of any changes
rimary account signature	Second account	signature
Date signed		