# THE RATHBONE MULTI-ASSET PORTFOLIOS APPLICATION FORM (S-CLASS) FOR CORPORATE INVESTORS

Please complete A, B, C and D in this form.
Type of investment (please indicate which you are making):
New application (use part 1 of this form)
Top-up (addition to current holding; use part 1 of this form)
Switches between funds or share types (Income or Accumulation; use part 2 of this form)
For investments into S-class shares for which the minimum lump sum investment is £1,000 and which have no initial charge.
If a top-up or a fund to switch, please tell us your current Rathbones Asset Management account number:

For your own benefit and protection, you must make sure that you have read the appropriate **Key Investor Information Document (KIID)** and the **Supplementary Information Document (SID)** for the fund(s) into which you are investing, topping-up or switching, before signing this application form. If you do not understand any part of the documents, please ask for further information or where appropriate, please consult your investment adviser.

#### A: ABOUT THE ORGANISATION

#### (This section must be completed)

Type of organisation			
opportunity, helping to prevent delays in the compl	etion of your application. Fregistered in the names of	appropriate information to open your account is provious Registered holders mush have a legal personality. If you the trustees, partners or other representatives of the trustees.	your organisation is an
The following organisations will be registered in the name of the organisation.	Section to complete		Section to complete
Listed public company	Section one	Parochial church councils	Section six
UK/EU/EEA regulated company	Section one	Public sector bodies/Local authority	Section seven
Non UK/EU/EEA regulated company	Section two	Independent school/College/University	Section seven
UK/EU/EEA distributor	Section one	Sovereign wealth fund	Section seven
Non UK/EU/EEA distributor	Section one	The following organisations will be registered	
Nominee (owned by regulated parent)	Section one	in the name of the trustees/legal owners.	Continue forms
Nominee (owned by an unregulated parent)	Section one	Registered personal pension scheme  Registered occupational pension scheme	Section four Section four
Platform	Section one	SSAS	Section four
Lawyers/Accountants	Section one	Unregistered pension scheme	Section one
Subject to statutory licencing	Section one	Trust	Section five
Private company (including limited liability partnership)	Section three	Unincorporated registered charity	Section five
Incorporated registered charity	Section three	Unregistered charity	Section five
Local authority pension scheme	Section seven	Partnership	Section six
UK churches and place of worship	Section six	Club/Society	Section six
Tax self-certification			
certification from you) we will have to share inform information with any or all participating tax jurisdic <b>Tax residency</b>	ation about your account(stions4.  ent for tax purposes and the	idency <sup>3</sup> . In certain circumstances (including if we do not be solved) with His Majesty's Revenue & Customs (HMRC) who have associated tax reference numbers in the table below. tification number.	may in turn share this
Country/countries of tax residency		Tax reference number <sup>5</sup>	

#### Tax self-certification notes

- <sup>1</sup> The term "tax regulations" refers to regulations created to enable automatic exchange of information and include FATCA<sup>2</sup>, various Agreements to Improve International Tax Compliance entered into between the UK and its Crown Dependencies and its Overseas Territories and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information (CRS).
- <sup>2</sup> The term "FATCA" refers to The Foreign Account Tax Compliance provisions contained in the US Hire Act 2010.
- <sup>3</sup> In general, you are tax resident where you are liable to taxes, based on where you live and work permanently although different jurisdictions have different rules in relation to tax residency. If in doubt, please contact your tax adviser.
- 4 Those countries that have agreed to exchange information under FATCA and the CRS1.

If you are not resident in any country for tax purposes, please tick this box

<sup>5</sup> If you are a UK tax resident and not a tax resident anywhere else and also not a US citizen, you are not required to provide details of your "Tax reference number" or 'date of birth', or if you are not resident in a jurisdiction that is reportable under CRS or FATCA and also not a US citizen, you are not required to provide your 'tax reference number' or 'date of birth'.

### SECTION ONE: LISTED, REGULATED AND NOMINEE COMPANIES

A) About the organisation				
Account number (existing investors only)	Account designation if applicable			
Organisation name (the account will be registered in this name)				
Registered address (including postcode)	The applicant/organisation is investing its own funds			
	The applicant/organisation is investing on behalf of another			
	individual(s) or organisation/entities, e.g. by acting as a nominee, distributor or custodian			
Business or correspondence address (including postcode)	Please confirm the nature of the relationship			
(if different from above)	-			
	Name of regulated parent company (non-regulated nominees only)			
	Regulatory authority and regulatory reference number			
Telephone				
B) Beneficial owners and senior management				
Listed companies or subsidiaries of listed companies				
	ed subsidiary of a listed company you do not need to complete the beneficial owner			
section (B, page 10). If this applies, please provide the name of the exchan	ge and security identifier/code for the listed company below.			
Individuals holding 25% or more of the share capital or voting rights  Any other people exercising control over the company (if applicable)  Board of Directors or equivalent				
C) Supporting documentation				
You'll also need to provide the following information. Please tick to confir	rm that it has been included with your application.			
Completed Wolfsberg questionnaire (anti-money laundering)				
Completed beneficial owners and senior management details (B, pag	ge 10, if applicable)			
Authorised signatory list				
Group structure chart (if applicable)				

### SECTION TWO: NON EU OR EEA REGULATED FIRMS

A) About the organisation	Province and the second of the					
Account number (existing investors only)						
Organisation name (the account will be registered in this name)	(if different from above)					
Registered address (including postcode)						
	Telephone					
	Account designation if applicable					
B) Beneficial owners and senior management						
isted companies or subsidiaries of listed companies						
Any other companies						
If your organisation is any other type of company (i.e. not a listed company) or a subsidary of a listed company), please complete the beneficial owner section (B, page 10) with details of the following individuals and tick the boxes to confirm that the information has been provided.						
B, page 10) with details of the following individuals and tick the boxes to	ny or a subsidary of a listed company), please complete the beneficial owner section confirm that the information has been provided.					
(B, page 10) with details of the following individuals and tick the boxes to  Individuals holding 25% or more of the share capital or voting rights	confirm that the information has been provided.					
(B, page 10) with details of the following individuals and tick the boxes to	confirm that the information has been provided.  (directly or indirectly, e.g. via a holding company)					
(B, page 10) with details of the following individuals and tick the boxes to  Individuals holding 25% or more of the share capital or voting rights	confirm that the information has been provided.  (directly or indirectly, e.g. via a holding company)					
(B, page 10) with details of the following individuals and tick the boxes to  Individuals holding 25% or more of the share capital or voting rights  Any other people exercising control over the company (if applicable)	confirm that the information has been provided.  (directly or indirectly, e.g. via a holding company)					
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(B), page 10) with details of the following individuals and tick the boxes to  Individuals holding 25% or more of the share capital or voting rights  Any other people exercising control over the company (if applicable)  Board of Directors or equivalent  C) Supporting documentation  If the applicant or the parent company of a nominee company is not regulation  Proof of regulation	confirm that the information has been provided.  (directly or indirectly, e.g. via a holding company) )					
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(B, page 10) with details of the following individuals and tick the boxes to  Individuals holding 25% or more of the share capital or voting rights  Any other people exercising control over the company (if applicable)  Board of Directors or equivalent  C) Supporting documentation  If the applicant or the parent company of a nominee company is not regulation  Certificate of incorporation or equivalent  Constitutional document, e.g. memorandum and articles of association of the provide the following information. Please tick to confirmation completed Wolfsberg questionnaire (anti-money laundering)  Authorised signatory list  Completed beneficial owners and senior management details (B, page Regulated parent comfort letter/letter of assurance (non-regulated not regulated not regulated parent comfort letter/letter of assurance (non-regulated not regulated not regulated parent comfort letter/letter of assurance (non-regulated not regulated not regulated not regulated parent comfort letter/letter of assurance (non-regulated not regulated not r	confirm that the information has been provided.  (directly or indirectly, e.g. via a holding company)  )  alated in the UK, EU or EEA, please provide the following additional information.  ion, bye-laws, articles of incorporation or equivalent  rm that it has been included with your application.  ge 10, if applicable)					
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### SECTION THREE: PRIVATE COMPANIES (INCLUDING LIMITED LIABILITY PARTNERSHIPS, UNLISTED PUBLIC COMPANIES AND INCORPORATED CHARITIES)

A) About the organisation	
Account number (existing investors only)	Company registration number
Organisation name (the account will be registered in this name)	Please describe the nature and industry of your business
Registered address (including postcode)	
	If your organisation has charitable aims please provide the following information
D	Charity registration number
Business or correspondence address (including postcode) (if different from above)	Description of aims and activities  Countries of operation
(if different from above)	Countries of operation
TelephoneAccount designation if applicable	
B) Beneficial owners and senior management	
been provided.  Individuals holding 25% or more of the share capital or voting rights (c  Any other people exercising control over the company (if applicable)  Board of Directors or equivalent  The signatories to this application form (if not already listed)  Trustees (charities only)	directly or indirectly, e.g. via a holding company)
C) Supporting documentation	
You'll also need to provide the following information. Please tick to confirm	n you've enclosed them with your application.
Certificate of incorporation or equivalent document	
Constitutional document, e.g. memorandum and articles of association	on, partnership agreement, bye-laws or equivalent
Completed beneficial owners and senior management details (B, page	210)
Authorised signatory list	
Group organisation structure chart (if the organisation is a subsidiary of	of another company)

### SECTION FOUR: REGISTERED PENSION SCHEMES (INCLUDING OCCUPATIONAL PENSION SCHEME, PERSONAL PENSION SCHEME AND SSAS)

A) About the organisation	
Account number (existing investors only)	Account designation if applicable
Pension Scheme (account will be registered in the name of the Trustees detailed in B, page 10)	
Registered address (including postcode)	Please also confirm your PSTR number (if applicable)
	If investing on behalf of an occupational pension scheme, please confirm the name of the employer or company which the scheme is linked to
Business or correspondence address (including postcode)  (if different from above)	
	Please confirm if the following statements apply to your scheme  Contributions are made by an employer or by deduction from an employee's wages
Telephone	The scheme rules do not permit the assignment of a member's interest under the scheme
B) Beneficial owners and senior management	
	louging individuals and tight the hoves to confirm
Please complete the beneficial owner section (B, page 10) with details of the fol  Trustees or equivalent (including corporate trustees) (B, page 10)	lowing individuals and tick the boxes to confirm.
Scheme beneficiaries	
Board of Directors or equivalent	
C) Supporting documentation	
You'll also need to provide the following information. Please tick to confirm you	u've enclosed them with your application.
Letter proving HMRC or pensions regulator scheme approval, for example	an HMRC approval letter, scheme submission receipt or scheme certificate
Details of individual trustees or trust company in whose name the accoun	it will be registered
Authorised signatory list	
Completed beneficial owners and senior management details (B, page 10)	
Group organisation structure chart for any corporate trustees (if the trust of	company is a subsidiary of another company)

### SECTION FIVE: TRUSTS OR UNINCORPORATED REGISTERED CHARITIES AND UNREGISTERED CHARITIES

Account number (existing investors only)  Name of Trust/Clarity (account will be registered in the name of the Trustees (B, page 10)  Registered address (including postcode)  Response or correspondence and postcode (including postcode)  Response or correspondence address (including postcode)  Response	A) About the organisation						
Trustees (8, page 10)  Registered address (including postcode)  Business or correspondence address (including postcode)  Gludificent from above)  Business or correspondence address (including postcode)  Gludificent from above)  If not please complete the below The type of trust (will trust, discretionary trust, etc.)  Telephone  The nature and purpose of the trust  Country of establishment  B) Beneficial owners and senior management  Please complete the beneficial owners and senior management  Trustees or equivalent (including corporate trustees)  Beneficiales of equivalent (including corporate trustees)  Protector(s) or any other individuals who have control over the trust  Settlor(s)  If a corporate trustee has been appointed, please also include.  Individuals holding 25% or more of the corporate trustees' share capital or voting rights (directly or indirectly, e.g. via a holding company)  Any other people exercising control over the corporate trustees (if applicable)  C Supporting documentation  You'll also need to provide the following information. Please tick to confirm you've enclosed them with your application.  The organisation's constitution and certificate or trust certain the account will be registered  Deeds of appointment and retrement of subsequent trustees of applicable.  Authorised signatory list (applicable to trust companies only)  Completed beneficial owners and senior management details (B, page 10)	Account number (existing investors only)	Account designation if applicable					
Registered address (including postcode)  Charity registration references, if applicable  Description of aims and activities  If not, please complete the helow  The type of trust (will trust, discretionary trust, etc.)  The pype of trust (will trust, discretionary trust, etc.)  The pype of the trust  Country of establishment  Country of establishment  Description of aims and activities  The type of trust (will trust, discretionary trust, etc.)  The pype of trust (will trust, discretionary trust, etc.)  Description of aims and activities  The type of trust (will trust, discretionary trust, etc.)  Description of aims and activities  The pype of trust (will trust, discretionary trust, etc.)  The pype of trust (will trust, discretionary trust, etc.)  Description of aims and activities  The pype of trust (will trust, discretionary trust, etc.)  The pype of trust (will trust, discretionary trust, etc.)  Description of aims and activities  The pype of trust (will trust, discretionary trust, etc.)  The pype of trust (will trust, discretionary trust, etc.)  Description of aims and activities  The pype of trust (will trust, discretionary trust, etc.)  The pype of trust (will trust, discretionary trust, etc.)  The nature and purpose of the trust  Country of establishment  Country of establishment  Country of establishment  The pype of trust (will trust, etc.)  The nature and purpose of the trust  Country of establishment  The pype of trust (will trust, etc.)  The organizations (including a class of beneficial owners and senior trust companies only)  Authorised signatory list (applicable to trust companies only)  Completed beneficial owners and senior management details (8, page to)							
Charty registration references, if applicable  Description of aims and activities  Business or correspondence address (including postcode)  Of different from above)  If not, please complete the below.  The type of trust (will trust, discretionary trust, etc.)  The rature and purpose of the trust  Country of establishment  Country of establishment  Piease complete the beneficial owner section (B, page 10) with details of the following individuals and tick the boxes to confirm.  Trustees or equivalent (including corporate trustees)  Beneficiates (including a class of beneficiary)  For Trusts only.  Poucetor(s) or any other individuals who have control over the trust  sention(s)  If a corporate trustee has been appointed, please also include.  Individuals holding 25% or more of the corporate trustee's share capital or vorting rights (directly or indirectly, e.g. via a holding company)  Any other people exercising control over the curstee (if applicable)  CS Supporting documentation  You'll also need to provide the following information. Please tick to confirm you've enclosed them with your application.  The organisation's constitutional document (e.g. extract of the trust deetl)  Declais of individual trustees and/or trust company in whose name the account will be registered  Decels of appointment and retirement of aubsequent trustices (if applicable)  Authorised signatory list (applicable to trust companies only)  Completed beneficial owners and senior management details (B, page 10)		If your organisation has charitable aims please provide the following information					
Business or correspondence address (including postcode)  (if different from above)  If not, please complete the below. The type of trust (will trust, discretionary trust, etc.)  Tidephone  The parties and purpose of the trust  Country of establishment  Country of establishment  B) Beneficial owners and senior management  Please complete the beneficial owner section (B, page 10) with details of the following individuals and tick the boxes to confirm.  Trustees or equivalent (including corporate trustees)  peneficianes (including a class of beneficiary)  For Trusts only.  Protector(s) or any other individuals who have control over the trust  settlor(s)  If a corporate trustee has been appointed, please also include.  Individuals looking 25% or more of the corporate trustees share capital or voting rights (directly or indirectly, e.g. via a holding company)  Any other people exercising control over the corporate trustee (if applicable)  C) Supporting documentation  You'll also need to provide the following information. Please tick to confirm you've enclosed them with your application.  The organisation's constitutional document (e.g. extract of the trust deed)  Details of individual trustees and/or trust company in whose name the account will be registered  Deeds of appointment and retirement of subsequent trustees (if applicable)  Authorised signatory list (applicable to trust companies only)  Completed beneficial owners and senior management details (B, page 10)	Registered address (including postcode)	Charity registration references, if applicable					
(if different from above)		Description of aims and activities					
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The nature and purpose of the trust    Country of establishment		If not, please complete the below.					
Details of the organisation's constitutional document (e.g. extract of the trust deed)   Details of individual trustees and/or trust company in whose name the account will be registered   Deeds of appointment and retirement of subsequent trustees (if applicable)   Completed beneficial owners and senior management   Deeds of appointment and retirement of subsequent trustees (if applicable)   Completed beneficial owners and senior management   Deeds of appointment and retirement of subsequent furstees (if applicable)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B, page 10)   Completed beneficial owners and senior management details (B,		The type of trust (will trust, discretionary trust, etc.)					
B) Beneficial owners and senior management  Please complete the beneficial owner section (B, page 10) with details of the following individuals and tick the boxes to confirm.  Trustees or equivalent (including corporate trustees)  Beneficiaries (including a class of beneficiary)  For Trusts only.  Protector(s) or any other individuals who have control over the trust  Settlor(s)  If a corporate trustee has been appointed, please also include.  Individuals holding 25% or more of the corporate trustee's share capital or voting rights (directly or indirectly, e.g. via a holding company)  Any other people exercising control over the corporate trustee (if applicable)  C) Supporting documentation  You'll also need to provide the following information. Please tick to confirm you've enclosed them with your application.  The organisation's constitutional document (e.g. extract of the trust deed)  Details of individual trustees and/or trust company in whose name the account will be registered  Deeds of appointment and retirement of subsequent trustees (if applicable)  Authorised signatory list (applicable to trust companies only)  Completed beneficial owners and senior management details (B, page 10)	Telephone	The nature and purpose of the trust					
Please complete the beneficial owner section (B, page 10) with details of the following individuals and tick the boxes to confirm.  Trustees or equivalent (including corporate trustees)  Beneficiaries (including a class of beneficiary)  For Trusts only.  Protector(s) or any other individuals who have control over the trust  Settlor(s)  If a corporate trustee has been appointed, please also include.  Individuals holding 25% or more of the corporate trustee's share capital or voting rights (directly or indirectly, e.g. via a holding company)  Any other people exercising control over the corporate trustee (if applicable)  Cy Supporting documentation  You'll also need to provide the following information. Please tick to confirm you've enclosed them with your application.  The organisation's constitutional document (e.g. extract of the trust deed)  Details of individual trustees and/or trust company in whose name the account will be registered  Deeds of appointment and retirement of subsequent trustees (if applicable)  Authorised signatory list (applicable to trust companies only)  Completed beneficial owners and senior management details (B, page 10)		Country of establishment					
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Group organisation structure chart for any corporate trustees (if the trust company is a subsidiary of another company)	Protector(s) or any other individuals who have control over the trust  Settlor(s)  If a corporate trustee has been appointed, please also include.  Individuals holding 25% or more of the corporate trustee's share capital of the corporate trustee (if application).  Any other people exercising control over the corporate trustee (if application).  C) Supporting documentation  You'll also need to provide the following information. Please tick to confirm you'll also need to provide the following information. Please tick to confirm you'll also need to provide the following information in whose name the all Details of individual trustees and/or trust company in whose name the all Deeds of appointment and retirement of subsequent trustees (if application).	ou've enclosed them with your application.					
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### SECTION SIX PARTNERSHIPS, CLUBS, ASSOCIATIONS, CHURCHES OR OTHER ORGANISATIONS

A) About the organisation	
Account number (existing investors only)  Organisation name (account will be registered in the name of the	Account designation if applicable
Directors/Members/Partners etc. (B, page 10)	
Registered address (including postcode)	Provide details of the type and purpose of the organisation  ——
Business or correspondence address (including postcode)  (if different from above)	
Talaphana	
Telephone	
B) Beneficial owners and senior management	
Please complete the beneficial owner section (B, page 10) with details of the	ne following individuals and tick the boxes to confirm.
Partners, directors, committee members or equivalent	
Any other person who exercises ultimate control over the manageme	nt of the organisation
C) Supporting documentation	
You'll also need to provide the following information. Please tick to confirm	n you've enclosed them with your application.
Partnership agreement or constitutional document	
Details of individual directors, partners, members, trustees etc. in who	
Completed beneficial owners and senior management details (B, page	e 10)

## SECTION SEVEN: GOVERNMENT DEPARTMENT, SOVEREIGN WEALTH FUND, LOCAL AUTHORITY, PUBLIC SECTOR PENSION SCHEME AND INDEPENDENT SCHOOLS/COLLEGE/UNIVERSITY

A) About the organisation	
Account number (existing investors only)  Organisation name (account will be registered in this name)	Account designation if applicable
Registered address (including postcode)	Please confirm the country of operation
	Provide details of the type and purpose of the organisation
Business or correspondence address (including postcode)	
(if different from above)	
Telephone	
B) Beneficial owners and senior management	
Please complete the beneficial owner section (B, page 10) with details of	f the following individuals and tick the boxes to confirm.
Directors, executive committee members/representatives or equiva	alent
The most senior person within the organisation (state the capacity	as 'most senior person')
Any other individuals exercising significant control	
The signatories to this application form (if not already listed)	
C) Supporting documentation	
You'll also need to provide the following information. Please tick to confi	firm you've enclosed them with your application.
Authorised signatory list	
Completed beneficial owners and senior management details	

### **B: DETAILS OF BENEFICIAL OWNERS AND SENIOR MANAGEMENT**

(This section must be completed)

Please complete all details using block capitals

Not required If your company is a listed company or a majority-ov	wned and consolidated subsidiary of a listed company.		
Non-individual (e.g. Corporate Trustee)	Class of beneficiary		
Title (Mr/Mrs/Miss/Ms/Other)			
Surname	e.g. grandchildren, the homeless		
Forename(s) in full			
Business address (including postcode)			
Capacity and percentage ownership, if applicable			
Individual	Individual		
Title (Mr/Mrs/Miss/Ms/Other)			
SurnameForename(s) in full			
Permanent residential address (including postcode)			
Termanent residential address (including posicode)	remailent residential address (including postcode)		
Capacity and percentage ownership, if applicable	Capacity and percentage ownership, if applicable		
Title (Mr/Mrs/Miss/Ms/Other)	Title (Mr/Mrs/Miss/Ms/Other)		
Surname	Surname		
Forename(s) in full	Forename(s) in full		
Permanent residential address (including postcode)	Permanent residential address (including postcode)		
Capacity and percentage ownership, if applicable	Capacity and percentage ownership, if applicable		
Title (Mr/Mrs/Miss/Ms/Other)	Title (Mr/Mrs/Miss/Ms/Other)		
Surname			
Forename(s) in full	Forename(s) in full		
Permanent residential address (including postcode)	Permanent residential address (including postcode)		
Canacity and parameters comparable if any limite	Canaity and parentage supporting if and its like		
Capacity and percentage ownership, if applicable	Capacity and percentage ownership, if applicable		

### Please complete all details using block capitals

Individual	Individual
Title (Mr/Mrs/Miss/Ms/Other)	Title (Mr/Mrs/Miss/Ms/Other)
Surname	Surname
Forename(s) in full	Forename(s) in full
Permanent residential address (including postcode)	Permanent residential address (including postcode)
Capacity and percentage ownership, if applicable	
Title (Mr/Mrs/Miss/Ms/Other)Surname	
Forename(s) in full	
Permanent residential address (including postcode)	Permanent residential address (including postcode)
Capacity and percentage ownership, if applicable	Capacity and percentage ownership, if applicable

### **C: INVESTMENT DETAILS**

(This section must be completed)

riease indicate your choice of it	und(s), share type	and amount to	o be invested or top	ped up		
nvestment details (for fund	d switches, plea	se see part 2)	)			
	Sh	nare type*	Amount/addit	ional amount to be inv	rested	Notes Minimum investment is £1,000 and top-u
	Inc	Acc	Lump sum		. of shares+	is £500. If you require your income paid out (Income shares) please complete
Rathbone Total Return Portfolio						the dividend mandate below to pay direct to your bank account.
athbone Defensive Growth Portf						*Share types are as follows: Inc = Income shares, income paid out;
athbone Strategic Growth Portfo athbone Strategic Income Portfo						Acc = Accumulation shares (see the Supplementary Information Document).
athbone Dynamic Growth Portfo						+ Maximum 2 decimal places.
athbone Enhanced Growth Portf						
We wish to invest or top up: £						62/76 Park Street, London SE1 9DZ
RT 2: (FOR SWIT)  NDS AND/OR BET  nvestment details for fund	TWEEN SH	IARE TY	PES, SAME	FUND)		
iivedinent detailo foi fand	owiteries (101 11	ew application	ons and for top a	po, predoc oce p	urt 1)	
ease remember that you must sw	witch into shares of	the same type	(i.e. either income or	accumulation). Ple	ase note that a £1	,000 limit applies to S-class share
	Share type*			Share type*	Ar	nount to be switched
and from:	Inc Acc F	Fund to:		Inc Acc	Lump sum	No. of shares+
						or
				£		Or
				£ _		Or
	_ 🗌 🗎 -			£		or
We wish to switch: £				as in	dicated above.	
otes: Please indicate your choice of fund(s)						one before inlease complete the dividend
nandate to pay direct to your bank account.  Oppropriate. Rathbone Global Opportunities F	. *Share types are as follow	vs: Inc = Income share				
		NG SOC	IFTY DETAI	I S TO REC	FIVE	
RT 3. (YOUR BAN	JK/RIJII DI	110 300		LO TO ICE		
-		OME PA	(YMENTS)			
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LE PROCEEDS AN	ND/OR INC	(income share	s) or sale proceeds		investments wil	l be paid into your bank or builc
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RT 3: (YOUR BAN LE PROCEEDS AN Please complete this section — ociety account. Please note the We will pay the proceeds of a sale sank/building society name	income payments at income cannot to your bank/build	(income share be paid if the in ing society acco	es) or sale proceeds nvestment is in accu  ount; please list detai  Bank o	s of which below. It	f you prefer to rec	be paid into your bank or build eive a cheque, please tick here
Please complete this section — ociety account. Please note the well pay the proceeds of a sale ank/building society name	income payments at income cannot to your bank/build	(income share be paid if the in ing society acco	punt; please list detai	s of which below. In the building society so the holder's name(s)	f you prefer to rec	eive a cheque, please tick here
Please complete this section — ociety account. Please note the we will pay the proceeds of a sale tank/building society name	income payments at income cannot to your bank/build	(income share be paid if the in ing society acco	es) or sale proceeds nvestment is in accu- ount; please list detai  Bank o  Accoun	is of which below. It is name(s) in the number	f you prefer to rec	eive a cheque, please tick here

### D: DECLARATION AND SIGNATURE(S)

### (This section must be completed)

Signature	Date	Signature	Date
Print name  Permanent residential address (including postcode) (required if this is to be a verifiable role type)		Print name  Permanent residential address (required if this is to be a verifia	•
Date of birth		Date of birth	
Signature	Date	Signature	Date
Print name		Print name	
Permanent residential address (including postcode) (required if this is to be a verifiable role type)		Permanent residential address (required if this is to be a verifia	•
Date of birth		Date of birth	
If this application is completed without an adviser's dec If this application is submitted through an Adviser or Ag application in whole or in part. Orders placed over the to	gent, the details o	verleaf must be completed by the Agent. The	
Data protection — Where relevant, Rathbones' privacy (as further detailed in the privacy notice) shall be pro-		•	- ·
From time to time Rathbones Asset Management Lim Rathbone group. However, you should note that wher your investments in these products to that adviser.	ited may wish to	communicate with you with information o	n other products and services offered by the
If you do not wish to be contacted by Rathbones com Data Protection Officer, Rathbones Asset Manageme			55:
Data Protection Officer, Nathbolles Asset Manageme	-	e may require you to supply evidence of ide	

Authorisation under FSMA 2000 (to be completed by an advise	r only)
My/our authorisation to give investment advice is through being authorised an	nd regulated by the Financial Conduct Authority:
My/our FCA reference number	
Section 1 <u>or</u> 2 must be completed and signed	
Adviser's declaration (to be completed by an adviser only)	
I/We confirm that the applicant named in this application is entitled to cancellation rights under the FCA (Conduct of Business) rules	<ol><li>I/We confirm that the applicant named in this application is not entitled to cancellation rights under the FCA (Conduct of Business) rules because (tick whichever explains why cancellation rights do not apply).</li></ol>
(Tick only if cancellation rights apply).	The applicant responded to a direct offer advertisement as defined by the FCA (Conduct of Business) rules.
	The applicant is an execution only customer.
/We hereby indemnify Rathbones Asset Management Limited for any osses suffered should it subsequently be discovered that the applicant	The applicant is subject to a customer agreement waiving such rights.
osses surfered should it subsequently be discovered that the applicant was entitled to cancellation rights and no cancellation notice was sent as a result of the above.	The application form was completed outside the United Kingdom as the result of advice given by me/an advertisement issued outside the United Kingdom.
Signed	Date
Name	Position
When completed, this form should be returned to your adviser or direct t Chelmsford CM99 2AG). For further information please see the Suppleme Adviser/agent stamp (please enter either company stamp or agr	
When completed, this form should be returned to your adviser or direct to Chelmsford CM99 2AG). For further information please see the Suppleme Adviser/agent stamp (please enter either company stamp or agrany enquiries  Please write to our dealing office or telephone us. For details please look at the	eed terms or if part of a network)  Supplementary Information Document.
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Copies of the Prospectus, the latest Key Investor Information Document (KIID), the Supplementary Information Document (SID), and the latest Manager's report and accounts for this fund are available on request from us, free of charge. Rathbones Asset Management Limited is authorised and regulated by the Financial Conduct Authority and a member of The Investment Association. A member of the Rathbones Group Plc. Registered office: 8 Finsbury Circus, London EC2M 7AZ Registered in England No. O2376568. 8 Finsbury Circus London EC2M 7AZ +44 (0)20 7399 0000 Rathbones Asset Management Information line:

+44 (0)20 7399 0399 ram@rathbones.com rathbonesam.com