

Pension Trustee Top-Up Form (including SIPP and SSAS) for OEIC and Unit Trust Investments

FundsNetwork

Please complete in BLOCK CAPITALS using BLACK INK. PLEASE NOTE: Any applications received that are not completed correctly may incur delays or may have to be returned to you.

- This application is for existing SIPP/SSAS and other pension schemes that wish to invest in funds on the FundsNetwork platform
- If you wish to invest in SICAV (offshore) funds, please contact us for the correct application form
- This form is NOT the correct form to invest in the FundsNetwork SIPP

1

Primary Trustee Details

Please enter the details of the Primary Trustee here. This should be the Corporate Pension Trustee. Where there is no Corporate trustee, please enter the details of the lead trustee who will receive the correspondence.

NAME OF PRIMARY TRUSTEE

RICHARD MARK EMERSON

ADDRESS FOR CORRESPONDENCE ("Care of" and PO Box are not acceptable. Only UK mainland and Northern Ireland addresses are eligible) HOUSE NUMBER AND/OR HOUSE NAME

THE CLIMBING ACADEMY

EXISTING ACCOUNT NUMBER

EMEAI00978

STREET, CITY, COUNTY AND COUNTRY DETAILS

BELVEDERE HOUSE, CHARLTON STREET
BRISTOL

POSTCODE

BS5 0FD

LEGAL ENTITY IDENTIFIER (Please note your identifier in the boxes provided.)

From 3 January 2018 you will need to give us a Legal Entity Identifier (LEI) if you are going to buy, sell or switch into or out of exchange traded instruments, such as investments trusts, exchange traded funds and company shares. For information in how to apply for an LEI, please go to fca.org.uk and search for 'LEI update'.

If you have more than one LEI, please include details with this form. We may need to contact you for further information.

2

Top-Up Instructions

Please complete your fund choice(s) and investment amount(s) below and refer to the Fund Range document or visit www.fidelity.co.uk/fundrange for the Fund Code and Fund Name. Note: Your fund choice will be derived by the Fund Code that you enter and not the Fund Name.

FUND CODE	FUND NAME	LUMP SUM (£)	MONTHLY (£) *
COSDA	ROYAL LONDON SUST. DIV. TRUST	7175.07	7175
ALFTA	LIONTRUST SUST. INT. MANAGED	7175.07	7175
VASEA	VANGUARD LIFE STRAT 60	174.93	175
VAEEA	VANGUARD LIFE STRAT 80	174.93	175

Income Option?

If you have chosen income funds the income will be automatically re-invested unless you complete your bank details in Section 4.

TOTAL INVESTMENT
AMOUNT (£)

14700.00

INITIAL FEE AMOUNT (£)
Only applicable if you have
chosen fee remuneration

0.00

TOTAL AMOUNT (£)

14700.00

If you are investing
monthly you must
complete your mandate
details in Section 4.

* Monthly Savings:

Any Monthly Savings Plan details given in this section will override the existing Monthly Savings Plan details for the account.

If investing a lump sum please
refer to Section 3.

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Содержание

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THE UNIVERSITY OF CHICAGO

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the 1990s, the government has been working to improve the quality of the health care system and to expand access to health care services. In 1990, the government passed the Health Care Reform Act, which established the National Health Insurance Fund (NHIF) and the National Health Insurance Agency (NHIA). The NHIF was a government-owned and operated insurance company that provided health insurance to all citizens. The NHIA was a government-owned and operated health care provider that provided health care services to all citizens. The government also established the National Health Insurance Fund (NHIF) and the National Health Insurance Agency (NHIA). The NHIF was a government-owned and operated insurance company that provided health insurance to all citizens. The NHIA was a government-owned and operated health care provider that provided health care services to all citizens.

RECEIVED FEBRUARY 10 1967

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MEMBERSHIP IN THE ASSOCIATION OF AMERICAN ENGINEERS

РЕДАКЦИОННО-ПЕЧАТНОЕ

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ESTABLISHED 1930

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1950

the authors are grateful to the National Science Foundation (NSF) for the support of this work under Grant Number DMR-9734639.

Journal of Management Education 35(1) 10-24 © 2011 Sage Publications
10.1177/0095647210396101
http://jme.sagepub.com
DOI: 10.1177/0095647210396101

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SECRET

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Lump Sum Payment Details

All lump sum payments should be made by cheque, payable to **Fidelity**.

Payment should be drawn from the company or scheme bank account. If you are sending a bankers draft or building society cheque please ensure that the back of the cheque states the name of the company or scheme account to be debited. This should be endorsed with the stamp of the bank/building society and signed by the bank official adding the endorsement.

4

Mandate Details

This section **MUST** be completed to allow future redemption payments to be paid electronically to your bank or building society, as we do not send cheques. Any bank details given in this section will override any existing bank details that we may hold for you. Although the below is a Direct Debit agreement, this section **MUST** also be completed if you opt to have income paid out otherwise income will be re-invested. Please specify by marking an X in the relevant box below and completing your bank details.

We have chosen an Income fund and would like our income to be paid out into the account detailed below. ☐

Instruction to your Bank or Building Society to pay by Direct Debit. Please pay Financial Administration Services Limited Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. We understand that this instruction may remain with Financial Administration Services Limited and, if so, details will be passed electronically to our Bank/Building Society. Banks and Building Societies may not accept Direct Debit instructions for some types of accounts.



NAME(S) OF SCHEME ACCOUNT — THIRD PARTIES ARE NOT ACCEPTED

ORIGINATORS REFERENCE NUMBER (Fidelity use Only)

TCA SSAS

BANK/BUILDINGSOCIETYACCOUNTNUMBER

BRANCH SORT CODE

04919088

238396

NAME AND ADDRESS OF BANK OR BUILDING SOCIETY

AIB, FOUR HARDMAN STREET

MANCHESTER M3 3HF

BUILDING SOCIETY COLLECTION ACCOUNT NUMBER (IF APPLICABLE) *

* Building Society accounts — the sort code and building society collection account number can be obtained from your Building Society branch. Please ensure that your Building Society account will accept direct credit payments through the Banks Automated Clearing system. Fidelity does not accept instructions for payments to be made to an account other than the client's own personal account. If the account number and sort code are incorrect, Fidelity will not accept responsibility for any loss incurred by the applicant.

□□□□□□□□□□□□□□□□

SIGNATURE AND DATE (YOU MUST SIGN HERE to set up a Monthly Savings Plan (MSP). You must also sign Section 7.)

X

14102020

5

Intermediary Details

This section should only be completed by Intermediaries. Please enter the appropriate details here and avoid supplying information on separate sheets.

UNIQUE ADVISER NUMBER

1165399

FCA FIRM REF NO.

I confirm that I am registered with the Financial Conduct Authority (FCA) to conduct business and my authorisation number is:

SMCO1150□□□□

OFFICEUSEONLY



INTERMEDIARY STAMP

THE LOST COIN F.P. LTD
5 LOVELIDGE COURT
FRAMPTON COTTERELL
BRISTOL BS36 2NX

REMUNERATION DETAILS

YES OR NO

Have you provided a personal recommendation? (please mark an X in one box only)



What remuneration type is required? (please mark an X in one box only).

From the 31 December 2012 if a personal recommendation has been given only fee remuneration will be applied.

ONGOING COMMISSION



Please note by ticking this box ongoing commission will be applied to this investment automatically.

INITIAL COMMISSION

□.□□%

For initial commission, please enter the percentage (%) you wish to take here, for this specific client, in 0.25% increments. If left blank, standard terms will apply.

OR

FEE



By ticking this box we will set this investment up on a fee basis and if an Ongoing Fee has previously been set up this will automatically be applied and any ongoing commission will be rebated to your client. If an Initial Fee is required please include details of the fee in Section 4 "Investment Details". An Ongoing Fee cannot be applied to this type of investment using an application form. If you would like to set up an Ongoing Fee this must be done online once the deals have been placed.

UNITED STATES DEPARTMENT OF THE TREASURY
Internal Revenue Service
Form 1041-100 (1999)

NAME OF THE TRUST OR ESTATE ☐ IF THE TRUST OR ESTATE IS A GRANTOR TRUST, CHECK THIS BOX AND REPORT THE TRUST'S TAXABLE INCOME ON YOUR OWN RETURN.

TRUST OR ESTATE IDENTIFICATION NUMBER (EIN) ☐ IF THE TRUST OR ESTATE IS A GRANTOR TRUST, CHECK THIS BOX AND REPORT THE TRUST'S TAXABLE INCOME ON YOUR OWN RETURN.

IF THE TRUST OR ESTATE IS A GRANTOR TRUST, CHECK THIS BOX AND REPORT THE TRUST'S TAXABLE INCOME ON YOUR OWN RETURN.

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RENTAL INCOME DETAILS

PROPERTY ADDRESS ☐ IF THE TRUST OR ESTATE IS A GRANTOR TRUST, CHECK THIS BOX AND REPORT THE TRUST'S TAXABLE INCOME ON YOUR OWN RETURN.

PROPERTY IDENTIFICATION NUMBER (PIN) ☐ IF THE TRUST OR ESTATE IS A GRANTOR TRUST, CHECK THIS BOX AND REPORT THE TRUST'S TAXABLE INCOME ON YOUR OWN RETURN.

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- The key information document applicable to my/our investment.
- The FundsNetwork Client Terms.

Important Notice: If you have not received one or all of the documents listed above, please contact your adviser.

Declaration and Signature

I/We understand that the information I/we provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the FundsNetwork Client Terms referred to below.

I/We understand that such information will be held in confidence and not passed to any company other than as outlined without our permission or unless required by law. I/We confirm that I/we have included the following information in order to complete this application: company documents; a complete list of company directors, together with specimen signatures (this should include details of signing rights, otherwise Fidelity will accept future instructions from two authorised directors, or one director and the company secretary); a certified copy of the relevant board minutes or written resolution of the directors, confirming that the company is authorised by its directors to invest corporate monies into collective investment schemes. I/We agree to provide Fidelity with written details of future changes of company directors together with specimen signatures.

Adviser Fees

By signing below, I/we agree to pay my/our adviser an Initial Fee, if applicable, as stated on this application form and in accordance with the FundsNetwork Client Terms. I/We understand that Fidelity FundsNetwork will receive the money as agent for my/our Financial Adviser, and that such money will become irrevocably due and payable to my/our Financial Adviser on receipt by Fidelity, to satisfy the Adviser Fees. I/we understand that Fidelity FundsNetwork will then hold this money in a Fidelity Corporate Account as agent of my/our adviser. I/We confirm that I/we have received a personalised illustration that shows the effect of the fee agreed on my/our investment.

I/We declare that:

- I/We have read the latest Key Features Document - Doing Business with FundsNetwork.
- I/We have read the latest key information document.
- I/We accept the FundsNetwork Client Terms.
- The information given by me/us is correct to the best of my/our knowledge, and I/we will inform Fidelity immediately of any changes to the information contained therein.

SIGNATURE(S) OF ALL NAMED TRUSTEES AND DATE (YOU MUST SIGN HERE - Please ensure all relevant sections are completed as per the instructions on this form)
If you are signing the application form by Power of Attorney, please call Fidelity for the details of documentation that is required for this to be acceptable.

You must provide a SIGNATURE for EACH NAMED TRUSTEE

Two authorised signatories are required to sign on behalf of a corporate entity, in addition to any named individuals.

FIRST CORPORATE BODY SIGNATURE

X

FIRST CORPORATE BODY PRINT NAME

X

SECOND CORPORATE BODY SIGNATURE

X

SECOND CORPORATE BODY PRINT NAME

X

FIRST TRUSTEE SIGNATURE

X

FIRST TRUSTEE PRINT NAME

X

SECOND TRUSTEE SIGNATURE

X

SECOND TRUSTEE PRINT NAME

X

THIRD TRUSTEE SIGNATURE

X

THIRD TRUSTEE PRINT NAME

X

FOURTH TRUSTEE SIGNATURE

X

FOURTH TRUSTEE PRINT NAME

X

27102020

Please send your completed form, and relevant application form to your Intermediary or to Fidelity, PO Box 391, Tadworth, KT20 9FU. Issued by Financial Administration Services Limited, authorised and regulated in the UK by the Financial Conduct Authority. FundsNetwork™ and its logo are trademarks of FIL Limited.

SECRET

1. The purpose of this document is to provide information regarding the procedures for the collection, processing, and dissemination of intelligence information. This document is intended for use by personnel involved in the intelligence process.

1 2 3 4 5 6 7 8 9 10

1. [Redacted]

FOURTH INITIALS SIGNATURE

2. [Redacted]

FOURTH INITIALS SIGNATURE

3. [Redacted]

FIFTH INITIALS SIGNATURE

4. [Redacted]

FIFTH INITIALS SIGNATURE

5. [Redacted]

SIXTH INITIALS SIGNATURE

6. [Redacted]

SIXTH INITIALS SIGNATURE

7. [Redacted]

SEVENTH INITIALS SIGNATURE

8. [Redacted]

SEVENTH INITIALS SIGNATURE

9. [Redacted]

EIGHTH INITIALS SIGNATURE

10. [Redacted]

EIGHTH INITIALS SIGNATURE

11. [Redacted]

NINTH INITIALS SIGNATURE

12. [Redacted]

NINTH INITIALS SIGNATURE

13. [Redacted]

14. [Redacted]

- 15. [Redacted]
- 16. [Redacted]
- 17. [Redacted]
- 18. [Redacted]

19. [Redacted]

20. [Redacted]

21. [Redacted]

22. [Redacted]

DISSEMINATION AND SIGNATURES

23. [Redacted]

- 24. [Redacted]
- 25. [Redacted]
- 26. [Redacted]

27. [Redacted]

DISSEMINATION PROCEDURES

6

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7

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X X

FIRST CORPORATE BODY PRINT NAME

SECOND CORPORATE BODY SIGNATURE

X X

SECOND CORPORATE BODY PRINT NAME

FIRST TRUSTEE SIGNATURE

X X

FIRST TRUSTEE PRINT NAME

SECOND TRUSTEE SIGNATURE

X X

SECOND TRUSTEE PRINT NAME

THIRD TRUSTEE SIGNATURE

X X

THIRD TRUSTEE PRINT NAME

ALAN CASSIDY

FOURTH TRUSTEE SIGNATURE

X X

FOURTH TRUSTEE PRINT NAME

27102020

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1. The purpose of this document is to provide information regarding the results of the investigation conducted by the Special Agent in Charge, [redacted], on [redacted] at [redacted].

2. The results of the investigation are as follows:

3. [redacted]

4. [redacted]

5. [redacted]

6. [redacted]

7. [redacted]

8. [redacted]

9. [redacted]

10. [redacted]

11. [redacted]

12. [redacted]

13. [redacted]

14. [redacted]

15. [redacted]

16. [redacted]

17. [redacted]

18. [redacted]

19. [redacted]

20. [redacted]

21. [redacted]

22. [redacted]

23. [redacted]

24. [redacted]

25. [redacted]

26. [redacted]

27. [redacted]

28. [redacted]

29. [redacted]

30. [redacted]

31. [redacted]

32. [redacted]

33. [redacted]

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73. [redacted]

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76. [redacted]

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78. [redacted]

79. [redacted]

80. [redacted]

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83. [redacted]

84. [redacted]

85. [redacted]

86. [redacted]

87. [redacted]

88. [redacted]

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92. [redacted]

93. [redacted]

94. [redacted]

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97. [redacted]

98. [redacted]

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100. [redacted]

101. [redacted]

102. [redacted]

103. [redacted]

104. [redacted]

105. [redacted]

106. [redacted]

107. [redacted]

108. [redacted]

109. [redacted]

110. [redacted]

111. [redacted]

112. [redacted]

113. [redacted]

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117. [redacted]

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119. [redacted]

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126. [redacted]

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137. [redacted]

138. [redacted]

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140. [redacted]

141. [redacted]

142. [redacted]

143. [redacted]

144. [redacted]

145. [redacted]

146. [redacted]

147. [redacted]

148. [redacted]

149. [redacted]

150. [redacted]

151. [redacted]

6

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X X

SECOND CORPORATE BODY PRINT NAME

FIRST TRUSTEE SIGNATURE

X X

FIRST TRUSTEE PRINT NAME

SECOND TRUSTEE SIGNATURE

X X

SECOND TRUSTEE PRINT NAME

THIRD TRUSTEE SIGNATURE

X X

THIRD TRUSTEE PRINT NAME

FOURTH TRUSTEE SIGNATURE

X X

FOURTH TRUSTEE PRINT NAME

ROBIN SUTTON

27102020

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L 0 0 0 2 8 0 3

1. The first part of the report is a general description of the project and its objectives. It includes a brief history of the project and a statement of the problem to be solved. The second part is a description of the methodology used in the study. This includes a description of the data sources, the statistical methods used, and the results of the analysis. The third part is a discussion of the results and their implications. This includes a comparison of the results with previous studies and a discussion of the limitations of the study. The final part is a conclusion and a list of references.

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