M&G Withdrawal Form



For Executor/Personal Representative Use Only

This form can be used to redeem part or all of a deceased persons holding(s) with M&G.

Please note that the proceeds of the shares cannot be paid until the form has been completed and signed by all Executors/Personal Representatives and received at the address specified on page 4.

Please complete this form in blue or black ink, using CAPITAL letters and ticking the appropriate boxes.

1 Registered details of the deceased person					
Mr Mrs Miss Ms Other	Date of birth				
Forename(s)	M&G client reference				
Surname					
Address	Designation (if applicable)				
Postcode					
Country					
Ar Mrs Miss Ms Other	Second Executor/Personal Representative (if applicable) Mr Mrs Miss Ms Other				
Mr Miss Ms Other	Mr Mrs Miss Ms Other				
Forename(s)	Forename(s)				
Surname	Surname				
Address	Address				
Postcode	Postcode				
Country	Country				
Phone: Home	Phone: Home				
Mobile Work	Mobile Work				
Email	Email				
Date of birth	Date of birth				

2 Executor/Personal Representative details (continued)

Third Executor/Personal Representative (if applicable)	Fourth Executor/Personal Representative (if applicable)				
Mr Mrs Miss Ms Other	Mr Mrs Miss Ms Other				
Forename(s)	Forename(s)				
Surname	Surname				
Address	Address				
Postcode	Postcode				
Country	Country				
Phone: Home	Phone: Home				
Mobile Work	Mobile Work				
Email	Email				
Date of birth	Date of birth				
Name and full postal address if paying directly to a Solicitor					
Forename(s)	Company name and address				
Surname					
Regulation number (eg SRA number)					
	Postrode				

3 Shares to be sold

In the 'Product type' column, please enter one of the following: ISA, Ex Mini ISA, Ex PEP ISA, APS ISA, OEIC or Savings Plan.

Please contact the ${\it Customer Relations}$ team on ${\it 0800 \ 390 \ 390}$ for information on the M&G holdings.

To highlight the number of shares you wish to sell, please complete either the 'No. of shares to be sold' column or the 'Amount you wish to raise' column below.

Product type	Full name(s) of fund(s)		Share class (eg A, A-H)	Share Type Delete as appropriate	No. of shares to be sold, or write ALL	Amount you wish to raise
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£
	M&G	Fund		Income/Accumulation		£

Note: Please use another sheet of paper if you need more space to list your choice of funds.

How/Where do you want your money paid? Cheque made payable: To the first Executor/Personal Representative completing this form and sent to them. To the notifying Solicitor and sent to them. Reinvest the sale proceeds into: An M&G Additional Permitted Subscriptions (APS) ISA - please enclose a completed M&G Additional Permitted Subscriptions (APS) ISA application form. An M&G ISA – please enclose a completed M&G ISA application form. An M&G Savings Plan - please enclose a completed M&G Savings Plan application form. **Directly to Executor/Solicitors:** Directly to a Solicitor(s) client money UK bank account - please complete the UK bank details in the boxes provided below. Please note your solicitor must be registered to accept client money. Directly to an Executor(s) UK bank account - please complete the UK bank details in the boxes provided below. If this option is chosen, in order for us to verify that this bank account is in the name of the Executor, we must see an original of a void cheque* or an original bank or building society statement or printed PDF copy of an online bank statement detailing your address and full name as the account holder (no older than three months). Your statement will be returned to you. If the recipient does not hold a UK bank account and does not wish to receive a cheque please call our Customer Relations team on 0800 390 390. *To void a cheque please cross through and write 'void' across the cheque. Name and full postal address of your bank or building society Bank or building society account number Bank or building society name Address Branch sort code Building society reference/roll number (if applicable) Postcode

Proceeds will normally be paid/released on the third business day (no later than five business days for ISAs) following receipt of all documents.

Please ensure that you check the details carefully before submitting this form as M&G cannot be held responsible for sending money to an incorrect bank account number provided by you.

For your protection, and to minimise the risk of financial crime, we are required by law to verify the identity of all our customers and any parties associated to them. If we have not been able to verify your identity by certain electronic means, we may ask you to send us paperwork as evidence of your address and identity. We have to do this before we are able to release the proceeds to you. If you would like to confirm whether your identity has been verified, please call our **Customer Relations** team on **0800 390 390**.

5 Data Protection and Privacy

Account name

We collect personal data from you for the purposes of administering your investment.

At M&G we are committed to protecting your privacy. To learn more about how we process your personal data please refer to our Privacy Notice available at **www.mandg.co.uk/privacynotice**.

6 Declaration and authorisation

Executors/Personal Representatives must sign this section and state their capacity.

I/We the Executors/Personal Representatives hereby acknowledge that I am/we are no longer interested in the shares to which this Withdrawal Form relates and authorise payment in Section 4.

First Executor/Personal Representative				
Print name	Capacity	Capacity		
Signature	Date D D	M M Y Y Y Y		
Second Executor/Personal Representative (i	f applicable)			
Print name	Capacity			
Signature	Date D D	M M Y Y Y Y		
Third Executor/Personal Representative (if ap	pplicable)			
Print name	Capacity			
Signature	Date D D) M M Y Y Y Y		
Fourth Executor/Personal Representative (if	applicable)			
Print name	Capacity	Capacity		
Signature	Date D D) M M Y Y Y Y		
! Returning your form				
Please send your completed form to: M&G Gro	DUD DO Poy 9029 Chalmsford CM99 2VG			
Checklist	oup, PO Box 9039, Chemistora Civia 220.			
	ves provided their date of birth in section 2?			
	· ·	and sent to the first Executor/Personal Representative		
	presentatives stated the capacity in which they			
	application form if you are using the proceeds			
How to contact us				
Call us	Visit our website	Write to us		
© 0800 390 390	www.mandg.co.uk	M&G Customer Relations		
We are open Monday to Friday from 08:00 to 18:00 and on Saturday from 09:00 to 13:00. For your security and to improve the quality of our service, we may record and monitor	Email us info@mandg.co.uk	PO Box 9039 Chelmsford CM99 2XG		
telephone calls.	Please note that information in an email cannot	nt .		

Please note that information in an email cannot be guaranteed as secure. Do not include sensitive information in emails to M&G.

M&G
Investments