

# M&G Withdrawal Form



**This form:**

- can be used to redeem part or all of your holding(s) with M&G
- cannot be used to redeem part or all of a deceased persons holding(s) with M&G. To do this please complete the M&G Withdrawal Form for Executor/Personal Representative.

Please note that the proceeds of your shares cannot be paid until the form has been completed and signed by all holders, and received at the address specified overleaf.

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

## 1 Registered details

Your M&G client reference

Designation (if applicable)

**First holder**

Mr  Mrs  Miss  Ms  Other

Date of birth

Forename(s)  
Surname

**Second holder** (if applicable)

Mr  Mrs  Miss  Ms  Other

Date of birth

Forename(s)  
Surname

OR Nominee/Company/Charity Name

**Third holder** (if applicable)

Mr  Mrs  Miss  Ms  Other

Date of birth

Forename(s)  
Surname

Permanent residential address  
  
Postcode  
Country

**Fourth holder** (if applicable)

Mr  Mrs  Miss  Ms  Other

Date of birth

Forename(s)  
Surname

Phone: Home  
Work  
Mobile  
Email

## 2 Shares to be sold

In the Product type field, please enter one of the following: ISA, Ex Mini ISA, Ex PEP ISA, APS ISA, OEIC, Savings Plan, Charifund, Charibond or Charity Multi Asset Fund.

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	OR 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		£

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

Please include your transaction reference in this box if you are confirming a deal that has already been placed:

If you are currently investing a regular amount by **Direct Debit** in the above fund(s), do you wish to continue?  Yes  No

Note: Please refer to the Important Information for Investors document for minimum withdrawal amounts and minimum balances. If the requested withdrawal reduces the value of your investment below the minimum balance for each share class, we may withdraw the full value of your investment

### 3 How/Where do you want your money paid?

Please select from the following five options:

- 3.1** Cheque made payable and sent to the first named holder. **This is the default option if this section is not completed.**
- 3.2** Reinvest the sale proceeds into an M&G Stocks and Shares ISA – please enclose a completed M&G ISA application form.
- 3.3** By electronic transfer to a 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 account is in the name of a registered holder, we must see an original of a void cheque\* or an original bank statement\*\* dated within the last three months. Your statement will be returned to you.

If you do not hold a UK bank account and do not wish to receive a cheque please call our **Customer Relations** team on **0800 390 390**.

Name and full postal address of your bank or building society

Bank or building society name

Address

Postcode

Bank or building society account number

Branch sort code

Building society reference/roll number (if applicable)

Account name

**Proceeds will normally be paid/released on the third business day (no later than five 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.

\*To void a cheque please cross through and write 'void' across the cheque.

\*\*We are unable to accept a statement printed directly from the internet.

- 3.4** Cheque made payable and sent to the home address of a named registered holder – please complete name and address details below.

**Please note**

We cannot make cheques payable to someone other than a registered holder except in exceptional circumstances. Please call us to discuss this if you believe you have reason to request such a payment.

Name

Capacity (if applicable)

Address

Postcode

- 3.5** Cheque to your financial adviser's client money bank account – please complete the box provided.

**Please note**

Your financial adviser must be registered to accept client money.

Financial adviser client money bank account name

Address

Postcode

For your protection, and to minimise the risk of financial crime, we are required by law to verify the identity of all our customers. 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**.

## 4 Declaration and authorisation

All holders must sign this section and state their capacity if applicable<sup>†</sup>. If you are not the holder, please state under which capacity you are signing<sup>††</sup>.

I/We the registered holder(s) hereby acknowledge that I am/we are no longer interested in the shares to which this Withdrawal Form relates and authorise payment as in Section 3.

### First holder

<input type="text" value="Print name"/>	<input type="text" value="Capacity (if applicable)"/>
<input type="text" value="Signature"/>	Date <input type="text" value="D D M M Y Y Y Y"/>

### Second holder (if applicable)

<input type="text" value="Print name"/>	<input type="text" value="Capacity (if applicable)"/>
<input type="text" value="Signature"/>	Date <input type="text" value="D D M M Y Y Y Y"/>

### Third holder (if applicable)

<input type="text" value="Print name"/>	<input type="text" value="Capacity (if applicable)"/>
<input type="text" value="Signature"/>	Date <input type="text" value="D D M M Y Y Y Y"/>

### Fourth holder (if applicable)

<input type="text" value="Print name"/>	<input type="text" value="Capacity (if applicable)"/>
<input type="text" value="Signature"/>	Date <input type="text" value="D D M M Y Y Y Y"/>

<sup>†</sup>When corporate bodies are renouncing shares, this form should be completed by the company and signed by two Directors or a Director and a Secretary, stating capacities, or authorised signatories. Alternatively, a company may execute this form under seal. Capacity may also mean Executor, Attorney or Trustee.

<sup>††</sup>If you are acting as Attorney or Trustee please state this as capacity.

## ! Returning your form


Please send your completed form to: **M&G Group, PO Box 9039, Chelmsford CM99 2XG.**

### Checklist

- Section 4: have all holders signed the Declaration? Failure to do so could cause a delay in receipt of your funds.
- Have the full names of all named account holders been listed along with their date of birth in Section 1?
- Have you checked that this instruction won't bring the value of the investment(s) below the minimum balance for each share class?
- Have you completed Section 3? If not, as a default option a cheque will be made payable and sent to the first named holder.

## How to contact us

### Call us

 **0800 390 390**

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 telephone calls.

### Visit our website


 **[www.mandg.co.uk](http://www.mandg.co.uk)**

### Email us

 **[info@mandg.co.uk](mailto:info@mandg.co.uk)**

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

### Write to us

 **M&G Customer Relations  
PO Box 9039  
Chelmsford  
CM99 2XG**

