



This **Cornhill International Wealth Builder Account Switch Form** ("Switch"), in compliance with the Financial Services Act 2019, Gibraltar, is submitted to **Whitmill Trust Company (Gibraltar) Limited**, a company with its registered office at 8c Pitman's Alley, Gibraltar, Company no 101911, incorporated in Gibraltar ("Trustee"), by the Client/ Settlor. The Client/ Settlor submits the Switch Form for the purpose of changing the allocation of securities within their Cornhill International Wealth Builder Account, a Gibraltar based discretionary Trust ("Agreement").

1. This Switch Form relates to the following Investment Account No.: _____

Client/ Settlor

2. Title: _____ 3. Surname: _____ 4. First name(s): _____

5. Date of birth: _____ (ddmmyyy) 6. Telephone: _____

7. E-mail: _____

8. Residential address:

Street, Number: _____ City: _____

Post/ZIP code: _____ Country: _____

Joint account*

Joint Account Holder

9. Title: _____ 10. Surname: _____ 11. First name(s): _____

12. Date of birth: _____ (ddmmyyy)

Part A - Instruction to SELL *

Please SELL all of the Securities held on my/our Investment Account

Please SELL the following Securities only:

No	Name	ISIN	Sell*
1.			<input type="checkbox"/> All <input type="checkbox"/> No of shares _____ <input type="checkbox"/> Amount and currency _____
2.			<input type="checkbox"/> All <input type="checkbox"/> No of shares _____ <input type="checkbox"/> Amount and currency _____
3.			<input type="checkbox"/> All <input type="checkbox"/> No of shares _____ <input type="checkbox"/> Amount and currency _____
4.			<input type="checkbox"/> All <input type="checkbox"/> No of shares _____ <input type="checkbox"/> Amount and currency _____
5.			<input type="checkbox"/> All <input type="checkbox"/> No of shares _____ <input type="checkbox"/> Amount and currency _____

Part B - Instruction for Purchase

I/We hereby wish to change the allocation of securities that I/we purchase regularly to the securities listed in the table below. This allocation supercedes any previous Instructions for Purchase and is to remain in place from now until the end of the investment period.

No	Name	ISIN	% of the Total Investment (sum of percentages must be 100)
1.			
2.			
3.			
4.			
5.			

Please specify the name and ISIN of each security to be purchased. The subsequent total or value of the specified Securities must equal 100% of the Total Investment amount. The minimum purchase amount for an individual Security is at least 20% of the Total Investment.

Please be aware that the Trustee may, at its sole discretion, reject an Instruction for Purchase if these minimum levels are not adhered to. Investment will take place after the deduction of fees and other related charges as set out in the Fee Schedule. If the purchase of a particular Security is not feasible due to reasons beyond the Trustee's control, the Trustee will without undue delay, advise the Client/ Settlor via e-mail and request supplementary Instructions. By signing these Instructions, the Client/ Settlor acknowledges and agrees that in a case where the purchase of a particular Security is not feasible, the Trustee is to hold the funds assigned for the purchase as cash, until supplementary Instructions are received.

The Client has familiarised themselves with the prospectus and simplified prospectus or KIID, management regulations, offering memorandum or any similar documents, the latest annual and semi-annual reports as well as statutes published by the issuers of the Securities which the Client shall obtain under the Instruction for Purchase, and the Client agrees with the stated documents and is bound to comply with them.

I/ We agree to all legal relationships based on this Switch Form being governed by the relevant provisions of the Trustee's General Terms of Business and the Trust Deed.

13. Date: _____ 14. Place: _____ 15. Signature of Client/ Settlor: _____

16. Date: _____ 17. Place: _____ 18. Joint Account Holder's Signature: _____

Adviser

19. Surname: _____ 20. First Name(s): _____

21. Company name: _____ 22. Telephone: _____

23. E-mail: _____

24. Date: _____ 25. Adviser's signature: _____

** Please indicate as appropriate or mark your choice with a cross*