



SECTION B – ADDITIONAL SUPPLEMENTARY CONTACT DETAILS

Name (Required)

INVESTOR / ADVISOR / CUSTODIAN (Please circle)

Email address (Required)

Company Name & Title (GPTFM use only)

Name (Required)

INVESTOR / ADVISOR / CUSTODIAN (Please circle)

Email address (Required)

Company Name & Title (GPTFM use only)

Name (Required)

INVESTOR / ADVISOR / CUSTODIAN (Please circle)

Email address (Required)

Company Name & Title (GPTFM use only)

Name (Required)

INVESTOR / ADVISOR / CUSTODIAN (Please circle)

Email address (Required)

Company Name & Title (GPTFM use only)

Name (Required)

INVESTOR / ADVISOR / CUSTODIAN (Please circle)

Email address (Required)

Company Name & Title (GPTFM use only)



SECTION C – AUTHORISED SIGNATORIES

Signatory 1

Name, company and title

Signatory 2

Name, company and title

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

IMPORTANT: PLEASE PROVIDE CURRENT ASL/POA/MIA WITH SPECIMEN SIGNATURE LIST.