Request for Payment of Interest or Dividends Please complete in BLOCK CAPITALS using black ink and return in accordance with the instructions overleaf.

A	Name of company in which shares are held							Sharehold	er reference if known	number (CIN),	
		Name Address						Accour	nt designatio	on (if any)	
В	Full name and address of the first named holder (see note 1 below)										
		Postcode						Daytir	ne telephone	e number	
C	Full name(s) of any other holders	Name				Name					
C	(including deceased if applicable)	Name				Deceased					
		Sign	ature (1)			(if applicabl	Signatu	ıre (2)			
	Signature(s)										
D	This form must be signed by ALL the registered holders, executors or	Signa	ature (3)				Signat	ure (4)			
	administrators.										
		each s	completed on behalf gnatory should state ty e.g. Company Secre	the representa		Date					
_	Р	lease pay futu	e interest or divi	dends for th	e above com	pany directly to th	e follo	wing or			
_		to any o	ther bank or build	ding society	which that o	rganisation may ir	nstruct.	-			
E	Name of bank, building society or person										
F	Full address, including postcode										
2. Payr	re shares are in the name of a decease nent in accordance with these instructi registrar reserves the right to require a	ons discharges th	e company and regis	strar from any			me of th	e deceased.			
Αссοι	unt name										
Brand	ch sort code										
Ассон	unt number										
	ing society reference l number (if applicable)										
G	Stamp of bank/building society	building soc stamp is req to the sole o required, to o	is a corporate bo iety is required. F uired where payn r first named hol confirm that the s der(s) or an autho	or personal nent is being der. The brar signature(s)	shareholders made other nch stamp is n box D is th	the than					
	Please return completed form	ns to The City I	Partnership (UK) I	Limited, The	Mending Ro	oms, Park Valley M	1ills, Mo	eltham Road, H	Huddersfield,	HD4 7BH,	

or email a signed copy to registrars@city.uk.com

Request for Payment of Interest or Dividends Please complete in BLOCK CAPITALS using black ink and return to the Registrar unless box G applies.

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	Name of company in	Registrars look after many companies. Enter the name of the company you have invested in as stated on your share	Shareholder reference number (CIN), if known						
A	which shares are held	certificate, tax voucher or other documentation from the company. If you leave this box blank, the form will have to be rejected.	This is your unique reference which will be stated on your certificates or tax vouchers.						
			Account designation (if any)						
	Full name and address of the first named holder (see note 1 below)		If applicable, enter the designation						
В		Clearly print your name and address as it appears on your share certificate, tax voucher or other documentation from	you have given your account, otherwise leave blank.						
		the company. If you leave this box blank, the form will have to be rejected.	Daytime telephone number						
			Instead of rejecting your request we may be able to resolve a query by speaking with you.						
	Full name(s) of								
C	any other holders (including deceased if applicable)	If your shares are held jointly, state the second and any subseq certificate, tax voucher or any other documentation from the co this section blank.	uent names as they appear on your snare ompany. If you are the sole holder, leave						
	Signature(s)	You must sign and date the form. If you are signing on behalf of someone else (i.e. using a Power of Attorney), you must ensure the registrar has seen and noted your authority in its records.							
D	This form must be signed by ALL the registered holders, executors or								
	administrators.								
		When completed on behalf of a corporate body, each signatory should state the representative capacity e.g. Company Secretary, Director.							
		Date							
	Plea	ise pay future interest or dividends for the above company directly to th	ne following or						
	Name of bank, building	to any other bank or building society which that organisation may in							
E	society or person	Clearly print the name of the institution or person you wish to	navyour dividands to						
F	Full address, including postcode	Clearly print the full address. If you are paying dividends into you should write the address of the branch where the account	a bank account for example,						
. Whe . Payn	postcode re shares are in the name of a deceased	you should write the address of the branch where the account holder, instructions signed by the executor(s) or administrator(s) should indicate the nar	a bank account for example, is held.						
. Whe . Payn . The	postcode re shares are in the name of a deceased nent in accordance with these instruction	you should write the address of the branch where the account holder, instructions signed by the executor(s) or administrator(s) should indicate the nar	a bank account for example, is held.						
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Whe Payn The ccou ranc ccou	postcode re shares are in the name of a deceased nent in accordance with these instruction registrar reserves the right to require ac unt name h sort code	you should write the address of the branch where the account holder, instructions signed by the executor(s) or administrator(s) should indicate the nar ons discharges the company and registrar from any further liability. ditional confirmation of the signature. This is a six d three groups or on a recent Your accou will be pri	a bank account for example, is held. ne of the deceased. The full name(s) that the account is registered igit number, often separated by two dashes into of two figures. It will be printed on your cheques : bank/building society statement. unt number will consist of up to 8 numbers and nted on your cheques, debit card or on a recent						
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