Use this form to make amendments to CCLA Charity Authorised Investment Fund account(s)



Mandate form

! Important information

Please read before completing this form.

This mandate form will supersede any other instructions we hold. Please provide all your CCLA Charity Authorised Investment Fund account numbers for which this mandate form applies, ensuring that a separate mandate form is used if any of the charity's accounts have different operating instructions.

Please ensure that all the required documents are enclosed as failure to do so may delay any future transactions (see Section 11 for checklist).

The space provided in Section 12 should be used to add more information on any section or disclose any support requirements.

Please call our Client Services Team on freephone **0800 022 3505** if you have any questions about this form or would like to discuss any additional support needs. Please note that telephone calls are recorded. If being completed by hand, please use black ink and write in BLOCK CAPITALS.

All pages of this form should be returned to CCLA, PO Box 12892, Dunmow, Essex CM6 9DL. Alternatively, a PDF version of the form can be sent to **cclaclientservices@fnztaservices.com** if an email instructions authority is in place.

If you are sending your instruction by email, please do not send the original documentation in the post and do not resend the email and/or the attachment.

Section 1 About your charity

Date (dd/mm/yyyy)

Charity name

1.1

Has your ch	arity's name cha	nged?
Yes	No	
If yes, pleas	e provide the pre	evious name

- 1.2 CCLA Charity Authorised Investment Fund account numbers to which this mandate form applies
- 1.3 Is your charity registered with the Charity Commission for England & Wales, the Charity Commission for Northern Ireland, or the Office of the Scottish Charity Regulator (OSCR)?

Yes ▶ Please go to 1.4 No ▶ Please go to 1.5

1.4 Charity's registration number

Please go to 1.6

HM Revenue & Customs reference number confirming charitable status 15 You do not have to complete this section if you have provided a Charity Commission registration number in 1.4. Note: correspondence from HMRC showing your charity's name or parish, address and HMRC reference number must be supplied in order to confirm charitable status. 1.6 Does your charity have an office address? ▶ Please go to 1.7 ▶ Please go to 1.8 Yes Nο 1.7 Charity's office address Postcode General email address Daytime telephone number 1.8 Correspondence preferences Please tick one option CCLA's Digital Portal - you can receive communications, including statements and transaction confirmations via the secure portal. OR Email - sent to the correspondent's email address. OR Post - please send correspondence to our: Office address (section 1.7) OR Correspondent home address (section 6.1) 1.9 Statements When does your charity's financial year end? (dd/mm) Please tick one option for frequency of statements Biannually Quarterly Monthly* *Please note that monthly statements are only available on the CCLA Digital Portal. See Section 6. 1.10 Is your charity also registered as a limited company? ► Please see below Yes No ▶ Please go to Section 2 1.11 Company registration number

Company name (if different from charity name provided in 1.1)

1.13	Company's registered address (if different from charity's office address provided in 1.7)	
	Postcode	
	rostcode	

Section 2 Your charity structure

2.1	Please confirm the structure of your charity:			
	Trust Please go to 2.4	Limited Cor	mpany/CIO	▶ Please go to 2.2
2.2	Is the company limited by shares or by guaran	itee?		
	Shares Please go to 2.3	Guarantee	► Please go	to 2.4
2.3	Does any individual or entity hold or control 2s of the company?	5% or more o	of the shares	or voting rights
	Yes No			
	If yes, please add their details below:			
	Individual 1 Name			
	Date of birth (dd/mm/yyyy) Position			
	Shareholding			
	%			
	Home address			
	Postcode			
	Individual 2			
	Name			
	Date of birth (dd/mm/yyyy) Position			
	Shareholding			
	%			
	Home address			
	Postcode			
	Entity 1			
	Company name			
	Company number	Shareholding	9	
		%		

Company address	
Postcode	
Entity 2 Company name	
Company number	Shareholding %
Company address	
Postcode	
charity/company. If your charity is registered with the Charity Charity Commission records can copy the fu	address of all trustees/executive directors of the Commission, the 'Super User' with access to the all information that we require about the trustees and a copy of this information with the form.
Trustee/executive director 1 Name	
Date of birth (dd/mm/yyyy) Position	
Home address	
Postcode	
Trustee/executive director 2 Name	
Date of birth (dd/mm/yyyy) Position	

Home address		
Postcode		
Trustee/executive director 3 Name		
Date of birth (dd/mm/yyyy)	Position	
Home address		
Postcode		
Postcode		
Trustee/executive director 4		
Name		
Date of birth (dd/mm/yyyy)	Position	
Home address		
Postcode		
Trustee/executive director 5 Name		
Date of birth (dd/mm/yyyy)	Position	
Home address		
Postcode		

Trustee/executive director 6 Name
Date of birth (dd/mm/yyyy) Position
Home address
Postcode
Please use the additional information section or a separate sheet if necessary.
Names of individuals who exercise control over the management of the charity/company who are not trustees/executive directors (e.g. Head of Finance etc.).
Individual 1 Name
Date of birth (dd/mm/yyyy) Position
Home address
Postcode
Individual 2 Name
Date of birth (dd/mm/yyyy) Position
Home address
Postcode
Individual 3 Name
Date of birth (dd/mm/yyyy) Position

Home address
Postcode
Individual 4 Name
Date of birth (dd/mm/yyyy) Position
Home address
Postcode

Section 3 Changing the subtitle of your account(s)

Do you wish to add or change the subtitle of any of your CCLA Charity Authorised Investment Fund account(s) mentioned in 1.2?

Yes	No	▶ Please go to Section 4		
Account nun	nber		New subtitle	
Account nun	nber		New subtitle	
Account nun	nber		New subtitle	
Account nun	nber		New subtitle	

Section 4 Income (for Deposit Fund/Income Units only)*

Please tick one option

Pay quarterly income to a COIF Charities Deposit Fund account in the charity's name (Payment to be made to 'HSBC as trustee of CCLA Fund Managers Limited Client Money Payments Account' 40-05-30 33694887)

COIF Charities Deposit Fund account number (to be used as the payment reference)

OR

Pay quarterly income to the nominated bank account (in Section 5)

Section 5 Nominated bank details

! Important information

Payments may only be made to a bank account in the charity's name. Please see Section 11 for the acceptable documents required to verify the bank account. Subscription payments must originate from the nominated bank account.

5.1	Do you wish to change the nominated bank account details?			details?
	Yes	No	▶ Please go to Section 6	
	Bank/building s	ociety na	ame	
	Account name			
	Sort code			Account number
	3011 0000			Account number
	B 11 11 11 11 11			
	Bullaing society	reterenc	ce (if applicable)	

Please send one of the following to verify the bank account: an original paying-in slip, an original cheque marked 'void' or a certified copy of a bank statement confirming the bank details above. The certification must be carried out by one of the following:

- representative of an FCA or EU equivalent regulated firm (e.g. bank manager)
- · solicitor/lawyer
- · chartered accountant
- notarv
- any CCLA Investment Management Limited employee.

The professional certifying the bank statement should:

- be a different person from anyone named on the form
- · not be related, in a relationship or living at the same address to any person named on the form
- write 'Certified to be a true copy of the original seen by me' on the document
- sign and date the document
- · print their name under the signature and add their occupation, address and telephone number.

Section 6 Correspondent/portal administrator

6.1	Please complete this section if the correspondent has changed. Title Forename		
	Middle name		Surname
	Date of birth (dd/mm/	yyyy) Position	
	Your mobile number ar Mobile number	nd email address will be used t	for security when logging into the portal. Daytime telephone number
	Email address		
	Home address		
	Postcode	Date moved to	o this address (dd/mm/yyyy)
6.2	Will you be an authoris Yes No	ed signatory?	
6.3		ating with you on page 25 of	ail, phone or post as set out in the section this form. I understand that I have the right
6.4	I confirm that to th is correct as at the		the above information I have provided
	Signature		Date (dd/mm/yyyy)

Section 7 Authorised signatories

7.1

Please photocopy pages of Section 7 if you require more than four authorised signatories.

7.1	Authorised signatory	
	Title	Forename
	Middle name	Surname
	Date of birth (dd/mm/yyyy) Position	
	Your mobile number and email address will be Mobile number	e used for security when logging into the portal. Daytime telephone number
	Email address	
	Home address	
	Postcode Date m	oved to this address (dd/mm/yyyy)
7.2		by email, phone or post as set out in the section e 25 of this form. I understand that I have the right
7.3	I confirm that to the best of my knowledg is correct as at the date of signing.	e all of the above information I have provided
	Signature	Date (dd/mm/yyyy)

Title Forename Middle name Surname Date of birth (dd/mm/yyyy) Position Your mobile number and email address will be used for security when logging into the portal. Mobile number Daytime telephone number Email address Home address Postcode Date moved to this address (dd/mm/yyyy) I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing. Signature Date (dd/mm/yyyy)	Authorised signatory	
Date of birth (dd/mm/yyyy) Position Your mobile number and email address will be used for security when logging into the portal. Mobile number Daytime telephone number Email address Home address Postcode Date moved to this address (dd/mm/yyyy) I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.	Title	Forename
Your mobile number and email address will be used for security when logging into the portal. Mobile number Daytime telephone number Email address Home address Postcode Date moved to this address (dd/mm/yyyy) I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.	Middle name	Surname
Mobile number Daytime telephone number Email address Home address Date moved to this address (dd/mm/yyyy) I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.	Date of birth (dd/mm/yyyy)	Position
Home address Postcode Date moved to this address (dd/mm/yyyy) I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.		
Postcode Date moved to this address (dd/mm/yyyy) I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.	Email address	
I agree to CCLA communicating with me by email, phone or post as set out in the section headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.	Home address	
headed Communicating with you on page 25 of this form. I understand that I have the right to request otherwise at any time. I confirm that to the best of my knowledge all of the above information I have provided is correct as at the date of signing.	Postcode	Date moved to this address (dd/mm/yyyy)
is correct as at the date of signing.	headed Communicating w	th you on page 25 of this form. I understand that I have the right
Signature Date (dd/mm/yyyy)		
	Signature	Date (dd/mm/yyyy)

7.4

7.5

7.7	Authorised signatory Title	Forename
	Middle name	Surname
	Date of birth (dd/mm/yyyy) Position	
	Your mobile number and email address will be undobile number	sed for security when logging into the portal. Daytime telephone number
	Email address	
	Home address	
	Postcode Date mov	ed to this address (dd/mm/yyyy)
7.8		email, phone or post as set out in the section 5 of this form. I understand that I have the right
7.9	I confirm that to the best of my knowledge a is correct as at the date of signing.	all of the above information I have provided
	Signature	Date (dd/mm/yyyy)

7.10	Authorised signatory Title	Forename
	Middle name	Surname
	Date of birth (dd/mm/yyyy) Position	
	Your mobile number and email address will be used Mobile number	d for security when logging into the portal. Daytime telephone number
	Email address	
	Home address	
	Postcode Date moved	to this address (dd/mm/yyyy)
7.11	I agree to CCLA communicating with me by en headed Communicating with you on page 25 o to request otherwise at any time.	
7.12	I confirm that to the best of my knowledge all or is correct as at the date of signing.	of the above information I have provided
	Signature	Date (dd/mm/yyyy)

Section 8 Email instructions authority

Instructions on a CCLA form, sent by email to us as a PDF, and signed in accordance with the account mandate, can be accepted if we have the relevant email instructions authority.

Please complete this section if you would like us to accept instructions by email.

! Important information

A PDF version of a CCLA form attached to your email is your instruction to us and should be sent to cclaclientservices@fnztaservices.com. Do not send the original documentation in the post and do not resend the email and/or the attachment as your instruction may be processed again. This mailbox will automatically upload the PDF for processing so any additional information contained in the body of the email will not be seen. If you have any additional information about the instruction that is not on the completed form, please send your email and PDF to our Client Services Team at clientservices@ccla.co.uk who will be happy to assist.

Authority to accept email instructions

In consideration of CCLA agreeing to accept from us, notwithstanding the terms of the relevant mandate, from time to time instructions purporting to come from us in the form of email instructions in relation to our account(s), we confirm and accept that CCLA does not accept responsibility for, and we will not seek to hold CCLA liable for any actions, proceedings, claims, losses, damage, costs and expenses that may be suffered or incurred as a result of CCLA accepting, or acting upon, instructions that CCLA reasonably believes have come from us, or have been given on our behalf. We accept responsibility for any losses or costs that might be incurred as a result of the cancellation of any purchase or sale of units carried out as a result of CCLA accepting, or acting upon, instructions that CCLA reasonably believes have come from us or have been given on our behalf.

Authorisation	

Authorised signatory name

Signature	Date (dd/mm/yyyy)
Authorised signatory name	
Signature	Date (dd/mm/yyyy)

Section 9 Charity operations

9.1	Does the charity currently (or intend to) donate or operate outside of the United Kingdom?			or operate outside of the United Kingdom?
	Yes	► Please list below	No	▶ Please go to 9.3
0.0	16			a ha avvankian O 1 ana liahankin Avan an div 1 alaana
9.2		he additional questions in this		e to question 9.1 are listed in Appendix 1, please ction:
9.2.1	What activ	ities have been undertaken in	each jur	risdiction during the last two years?
9.2.2	How many	branches and/or offices does	the cha	rity have in each jurisdiction?
9.2.3	What is the	e number and location of emp	loyees/v	volunteers?
924	What is the	a source of the charity's fundir		ublic donations, legacies etc.?
3.2.4	WHAT IS THE	s source of the chartry's funding	ig e.g. p	ublic dollations, legacies etc.:
9.2.5		vide details of the charity's inc ources and jurisdiction.	ome ge	nerated during the last three years including the
	,			
9.2.6	Does the c Yes	harity have a/any benefactor(: No	s) who c	ontribute 10% or more of the charity's income?
		se provide details:		
	For indivi	duais		
	Individual 1	I		
	Name			
	Date of bir	th (dd/mm/yyyy)		

Address	
Postcode	
Individual 2 Name	
Date of birth (dd/mm/yyyy)	
Address	
Postcode	
Individual 3 Name	
Date of birth (dd/mm/yyyy)	
Address	
Postcode	
For entities	
Entity 1	
Company name	Company number
Entity 2	
Company name	Company number
To which jurisdictions does the charity make distributions greater than 10% of total	ıl annual

9.2.7 distributions?

9.2.8	Does the charit all its operation	y have a code of conduct covering bribery and corruption that is applicable across is?
	Yes	No
9.3	What is the pur	pose of the investment with CCLA?
9.4	Who are the be	eneficiaries of the charity, e.g. homeless people or children living in poverty?
9.5	What is the inte	ended frequency of transactions for the accounts listed?

Section 10 Trustees/executive directors' authorisation

This section must be read, completed and signed by a **minimum of two trustees/executive directors who have the authority to act on behalf of the charity**. The trustees signing this section on behalf of a registered charity must be named on the Charity Commission register. Executive directors, such as CEOs, should be named as directors on the Companies House register.

Please note that CCLA adheres to Charity Commission guidance that all accounts should be operated by at least two authorised signatories.

Please consult an intermediary if you require investment advice.

Anti-money laundering

You may be asked to provide documentation to assist CCLA in verifying the identity of any individuals/ entities referenced in this form in accordance with regulatory requirements. This is normally done using electronic means but occasionally extra documents may be required from you to complete this process.

Declarations:

We represent, warrant and undertake that:

- The charity remains eligible to invest in the CCLA Charity Authorised Investment Fund and indemnifies CCLA against any liabilities arising out of its ineligibility.
- · We are authorised to act on behalf of the charity.
- All trustees/executive directors, persons with significant control/influence over the charity and holders of 25% or more of the shares of the company (stated in this form) are known to us.
- To the best of our knowledge none of our trustees or authorised signatories are Politically Exposed Persons ("an individual who is or has, at any time in the preceding year, been entrusted with prominent public functions, or an immediate family member, or a known close associate, of such a person").
- We will notify CCLA of any subsequent changes to the authorising trustees/executive directors, correspondent and/or authorised signatories.
- If this mandate form is being authorised by a sole trustee/executive director, it is understood that this is only permitted where there are no other trustees/executive directors.
- The account(s) continue to be used to hold only charitable money.
- · If the investing organisation ceases to be a charity we will inform CCLA immediately and disinvest.
- We understand that in the provision of this service, CCLA is executing transactions following our
 instruction and is not providing advice on the merits of transactions and in relation to which the rules
 on assessment of appropriateness and suitability do not apply. Consequently, investors do not benefit
 from the protection of the rules on assessing appropriateness and suitability provided within the
 FCA Rules (as defined in the Scheme Prospectus).
- The information contained in this form is true and accurate to the best of our knowledge and belief.

Authorisation:

We authorise you to:

- Conduct the account(s) as instructed in this mandate form.
- Accept faxed instructions that purport to be properly issued in accordance with this mandate form. We indemnify you against any costs or loss arising from your acting on such instructions.
- Grant to the person named as correspondent in Section 6 to act as administrator of the CCLA Digital Portal the portal administrator. The CCLA Digital Portal is an online tool that allows users to view their accounts, holdings, valuations, transactions and associated documents. The person who is the portal administrator will be able to grant/revoke access to the portal for others within their organisation.

First trustee/executive director Name	▶ Please ensure full details are supplied in section 2.4
Email address	
Mobile number	Daytime telephone number
Signature	Date (dd/mm/yyyy)
Second trustee/executive director Name	▶ Please ensure full details are supplied in section 2.4
Email address	
Mobile number	Daytime telephone number
Signature	Date (dd/mm/yyyy)

Section 11 Checklist and documentation required

PLEASE TICK TO CONFIRM ALL OF THE DOCUMENTS ARE ENCLOSED.

If you have provided us with new bank account details under Section 5, please return the form with one of the following:

- an original paying-in slip
- an original cheque marked 'void'
- a certified copy of a bank statement.

If you are sending a certified copy of a bank statement, the certification must be carried out by one of the following listed below:

- · representative of an FCA or EU equivalent regulated firm (e.g. bank manager)
- solicitor/lawyer
- · chartered accountant
- notary
- any CCLA Investment Management Limited employee.

The professional certifying the bank statement should:

- be a different person from anyone named on the form
- · not be related, in a relationship or living at the same address to any person named on the form
- · write 'Certified to be a true copy of the original seen by me' on the document
- sign and date the document
- print their name under the signature and add their occupation, address and telephone number.

If your charity is not registered with the Charity Commission for England and Wales, please attach a copy of the minutes of a recent trustee meeting for the purpose of confirming the relationship of the authorising trustee(s) to your charity. The minutes should not be any older than 12 months and the authorising trustees/executive directors as indicated in Section 10 should be named in the minutes.

If your organisation is not a church council or the charity is not required to be registered with the Charity Commission, please supply a copy of correspondence from HM Revenue & Customs stating charitable status. The correspondence must show the charity's name, address and the HM Revenue & Customs reference number. If this is not the case, an explanation must be provided in Section 12.

If your charity is registered with the Charity Commission for England and Wales the authorising trustees that have signed in Section 10 must appear on the register.

For the trustees who have authorised this mandate form and the authorised signatories appointed **who reside outside of the United Kingdom**, please attach the following evidence so we may verify your identity:

- Certified copy of passport photo page or certified copy of driving licence and
- · Certified copy of utility bill (not more than three months old)

Certification must be carried out by one of the following: a representative of an FCA or EU equivalent regulated firm, a solicitor/lawyer, a chartered accountant, a notary or any CCLA Investment Management Limited employee.

The certification must include the words 'Certified to be a true copy of the original seen by me'. The professional should be a different person, not be related, in a relationship or living at the same address to anyone named on the mandate form and should sign, date, print their name under the signature and add their occupation, address and telephone number, all in BLOCK CAPITALS and in English.

Section 12 Additional information and notes	
Please use this section to disclose any additional information or support requirements.	

! Important information

Your personal information

Privacy Notice

CCLA's Privacy Notice sets out how CCLA complies with UK Data Protection requirements and how it processes and protects your personal information. CCLA's Privacy Notice can be found on our website at **www.ccla.co.uk**.

Communicating with you

CCLA may collect and use your personal information to bring to your attention additional products or services which may be of interest to you by email, telephone or post. Where we are required to obtain your consent to communicate with you by email or telephone or post we will do so. You have the right to ask us not to process your personal information for this purpose at any time. Please email us at clientservices@ccla.co.uk or telephone us on 0800 022 3505.

Sharing your personal information

To provide our services to you we may share your personal information with third parties including:

- those who provide administrative and operational services to us;
- to verify your identity in accordance with UK money laundering requirements. These may include credit reference agencies;
- · where required by law, regulation or a court order;
- fraud and law enforcement agencies if you give us false or inaccurate information or you have made us aware that you suspect fraud; and
- · HMRC or the Financial Conduct Authority.

Appendix 1 List of jurisdictions

The countries listed below are provided in relation to Section 9.

Saint Vincent and Albania Djibouti Lebanon the Grenadines Afghanistan Dominica Lesotho Samoa Algeria Dominican Republic Liberia

Sao Tome and Principe American Samoa Ecuador Libya

Saudi Arabia Angola Egypt Macau Senegal Anguilla El Salvador Madagascar Serbia Antigua and Barbuda Equatorial Guinea Malawi Seychelles Argentina Eritrea Malaysia Sierra Leone Armenia Eswatini Maldives Sint Maarten Azerbaijan Ethiopia Mali Solomon Islands

Bahamas Fiji Malta Somalia Marshall Islands Bahrain Gabon South Africa Bangladesh Gambia Mauritania South Sudan Barbados Mauritius Georgia Sri Lanka Belarus Ghana Mexico Sudan Benin Gibraltar Moldova Suriname Bhutan Grenada Mongolia Syria Bolivia Guam Montenegro Taiwan Bosnia and Herzegovina Guatemala Morocco Tajikistan Botswana Guinea Mozambique Tanzania Brazil Guinea Bissau Myanmar (Burma) Thailand British virgin islands Guyana Namibia Timor-Leste Bulgaria Haiti Nepal

Burkina Faso Honduras Nicaragua Trinidad and Tobago Burundi Hong Kong Niger Tunisia Cambodia Hungary

Nigeria

Turkey Cameroon India North Macedonia Turkmenistan Cape Verde Indonesia Oman Turks and Caicos Cayman Islands Iran Pakistan

Uganda Central African Republic Iraq Palau Ukraine Chad Israel Panama

United Arab Emirates Chile Jamaica Papua New Guinea US Virgin Islands China Jordan Paraguay Uzbekistan Colombia Kazakhstan Peru Vanuatu Comoros **Philippines** Kenya Venezuela Costa Rica Korea, North Qatar

Vietnam Cote d'Ivoire Korea. South Republic of Congo Yemen Cuba Kosovo Romania Zambia Kuwait Russia Curacao Zimbabwe

Democratic Republic Kyrgyzstan Rwanda of the Congo Saint Lucia Laos

CCLA One Angel Lane London EC4R 3AB



Freephone **0800 022 3505** clientservices@ccla.co.uk www.ccla.co.uk

Togo