

Additional Permitted Subscription (APS) In Specie Transfer Form

This form is for individuals wanting to transfer their deceased Spouse's Fundsmith ISA directly into their APS ISA. In order to do this, you need to have already completed the *Additional Permitted Subscription (APS) ISA Application* form available on our website.

- **Please complete this form in ink using BLOCK CAPITALS.**
- Return the form to **Fundsmith LLP, PO Box 10846, Chelmsford, CM99 2BW.**
- The Key Investor Information Document and the Supplementary Information Document including the Fundsmith ISA Terms and Conditions contain important information about the Fundsmith Equity Fund and the Fundsmith ISA and all investors should read these prior to completing this form. These documents are provided via our website at www.fundsmith.co.uk.
- If you are unsure about the suitability of this fund, please consult your financial adviser.

Name of APS applicant	
Title	Surname
Forename(s)	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Existing Fundsmith account number (if available)	

Permanent residential address in full	
<input type="text"/>	
<input type="text"/>	
Postcode	Email
Telephone	Mobile

Details of the Deceased	
Title	Forename(s)
Surname	
<input type="text"/>	
Permanent residential address of the Deceased at their date of death	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	Postcode
Existing Fundsmith account number	<input type="text"/>

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Executor/Administrator's Declaration

By signing this form, the Executors or Administrators of the Deceased's estate confirm that the applicant is the beneficiary of the Deceased's Fundsmith ISA and Fundsmith is authorised to re-register the Deceased's ISA Investments into the name of the APS Applicant.

Please note that for a Corporate Executor or Administrator we require two signatures along with a certified signature list.

Signature (Executor/Administrator)	Date
<input type="text"/>	<input type="text"/>
Name	Capacity
<input type="text"/>	<input type="text"/>
Signature (Executor/Administrator 2, if applicable)	Date
<input type="text"/>	<input type="text"/>
Name	Capacity
<input type="text"/>	<input type="text"/>
Signature (Executor/Administrator 3, if applicable)	Date
<input type="text"/>	<input type="text"/>
Name	Capacity
<input type="text"/>	<input type="text"/>
Signature (Executor/Administrator 4, if applicable)	Date
<input type="text"/>	<input type="text"/>
Name	Capacity
<input type="text"/>	<input type="text"/>

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Applicant's Declaration

By signing this form, I declare:

- I am the surviving Spouse/Civil Partner of the Deceased named on this form.
- I was living with the Deceased within the meaning of section 1011 of the Income Tax Act 2007 at the date of the Deceased's death (we were not separated under a court order, under a deed of separation or in circumstances where the marriage or civil partnership had broken down).
- The subscription is made under the provisions of regulation 5DDA of the ISA regulations (additional permitted subscriptions).
- This in specie transfer subscription is made within 180 days of beneficial ownership of the Deceased's ISA passing to me.
- I have a copy of the latest available Key Investor Information Document and Supplementary Information Document and have kept them for my records. I consent to Fundsmith LLP providing the Key Investor Information Document via Fundsmith's website at www.fundsmith.co.uk.
- I agree to be bound by the ISA Terms and Conditions, within the Supplementary Information Document and accept that these may be varied in accordance with their terms.
- The information given in this application form is correct to the best of my knowledge and belief.

Signature

Date