

abrdrn Investment Trusts Declaration and Indemnity Form



When we say 'we' or 'us' we mean abrdrn Investments Limited.

Part 1 - Personal details of the deceased

abrdrn investor reference	<input type="text"/>
Title	<input type="text"/>
Surname	<input type="text"/>
First names (in full)	<input type="text"/>

Part 2 - Executor(s)/Administrator(s)

These are the people who are entitled legally to deal with the Account Holder's estate. If you are not the Executor(s)/Administrator(s) or are in any doubt, please contact your solicitor.

If there are more Executor(s)/Administrator(s) please provide details on a separate page.

Executor/Administrator 1

Title (Mr/Mrs/Miss/Ms/ Other e.g Dr/Rev)	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Surname	<input type="text"/>		
First names (in full)	<input type="text"/>		
Building number	<input type="text"/>		
Street	<input type="text"/>		
City/Town	<input type="text"/>		
County	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		



Part 2 – Executor(s)/Administrator(s) (continued)

Executor/Administrator 2

Title (Mr/Mrs/Miss/Ms/ Other e.g Dr/Rev)	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Surname	<input type="text"/>		
First names (in full)	<input type="text"/>		
Building number	<input type="text"/>		
Street	<input type="text"/>		
City/Town	<input type="text"/>		
County	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		

Executor/Administrator 3

Title (Mr/Mrs/Miss/Ms/ Other e.g Dr/Rev)	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Surname	<input type="text"/>		
First names (in full)	<input type="text"/>		
Building number	<input type="text"/>		
Street	<input type="text"/>		
City/Town	<input type="text"/>		
County	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		

Part 2 – Executor(s)/Administrator(s) (continued)

Executor/Administrator 4

Title (Mr/Mrs/Miss/Ms/ Other e.g Dr/Rev)	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Surname	<input type="text"/>		
First names (in full)	<input type="text"/>		
Building number	<input type="text"/>		
Street	<input type="text"/>		
City/Town	<input type="text"/>		
County	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		

Part 3 – Data Protection and Money Laundering

Data Protection Information

We will collect and use personal information about you (and other named individuals, where applicable) as provided on this application in order to provide this product or service and manage our relationship with you.

The information collected may be shared with other parts of abrdn plc, and other companies we work with to support us in the provision of this product or service. We may also share your information with our regulators and HM Revenue & Customs, where necessary and lawful to do so. Whenever we share your personal information, we will do so securely and only where necessary to provide the agreed service.

The majority of your information is processed in the UK or European Economic Area (EEA). However, some of your information may be processed by us or the third parties we work with in countries outside of the UK or the EEA. Where your information is being processed outside of the UK or the EEA, we take additional steps to ensure that your information is protected to at least an equivalent level as would be applied by UK or EEA Data Protection Laws e.g. we will put in place legal agreements with third parties and abrdn affiliates with ongoing oversight to ensure they meet these obligations.

If you wish to contact us about any aspect of data protection law and how it affects your relationship with us, please write to Data Privacy Office – abrdn plc, 1 George Street, Edinburgh EH2 2LL. Alternatively, you may email: DPOffice@abrdn.com

Money Laundering Information

To comply with the UK's Money Laundering Regulations, we are required to verify your identity by carrying out an online check with a reference agency. Where an on-line check is carried out, the agency will verify your identity against public records and it will also check whether you have a credit history (but it will not disclose any information about your actual borrowings). The agency will add a note to show that an identity check was made to your credit file, but this information will not be available to any third parties. If the online check does not confirm your identity, we will be required to carry out a manual check by requesting further documentation from you. Anti-Money Laundering Regulations prevent us from releasing proceeds without first having verified your identity.

Part 4 – Undertaking to be signed by all Executor(s)/Administrator(s)

I/WE, the Executor(s)/Administrator(s) of the Account Holder confirm that, we do not intend to seek Grant of Probate/Letters of Administration/ Confirmation and CONSIDERING that abrdn Investments Limited has agreed to pay the redemption proceeds in accordance with my/ our instructions without requiring me/us to produce a Grant of Probate/Letters of Administration/Confirmation to it, HEREBY DECLARE, that the answers given to the foregoing are true and to the best of my/our knowledge and belief and I/WE AGREE and UNDERTAKE to fully indemnify abrdn Investments Limited against all claims or demands, to the extent of the redemption proceeds, which may be brought against it at any time hereafter.

I/WE are aware that knowingly making a false claim is a criminal offence.

Please ensure that the Executor / Administrator and any Witnesses sign and date below.

¹ A witness can be anyone aged 18 or over who is not a family member.

Date

Executor / Administrator 1

Signed by the said Executor/ Administrator  **Signature(s) required**

in the presence of Witness¹ (Full name)

Witness Signature  **Signature(s) required**

Building number

Street


City/Town

County Postcode

Executor / Administrator 2

Signed by the said Executor/ Administrator  **Signature(s) required**

in the presence of Witness¹ (Full name)

Witness Signature  **Signature(s) required**

Building number

Street

City/Town

County Postcode

Executor / Administrator 3

Signed by the
said Executor/
Administrator



Signature(s) required

in the presence
of Witness¹
(Full name)

Witness Signature



Signature(s) required

Building number

Street

City/Town

County

Postcode

Executor / Administrator 4

Signed by the
said Executor/
Administrator



Signature(s) required

in the presence
of Witness¹
(Full name)

Witness Signature



Signature(s) required

Building number

Street

City/Town

County

Postcode

Useful information

Mail your form to: abrdn Investments Limited, PO BOX 11020, Chelmsford, CM99 2DB

If you need any help completing this form, please contact us on 0808 500 4000. Calls may be monitored and/or recorded to protect both you and us and help with our training. Call charges may vary.

You can find some guidance on the bereavement process on our website at the link below
www.invtrusts.co.uk/bereavement-process

You can also schedule a call with our dedicated Bereavement Team, who can provide further information on our processes.

abrdn Investments Limited is authorised and regulated by the Financial Conduct Authority in the United Kingdom.
Registered in Scotland No. SC108419. Registered Office: 10 Queen's Terrace, Aberdeen, Aberdeenshire, AB10 1XL.

invtrusts.com

STA0623793572-001