

# ISA Investor withdrawal form

Before completing this form and for an explanation of the terms used, please refer to the enclosed leaflet 'Your guide to making withdrawals from your ISA Investor' which also includes guidance on how to complete this form.

## 1. Personal details Please amend any details if incorrect

Full name:	
Address:	
	Postcode:

Account number: 6	OR Plan number: 14/	Telephone number: including STD code ( )
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## 2. Withdrawal type

Tick **one** of the following options below (ticking more than one will invalidate this form).

- I wish to sell **all** shares in my plan and **continue** with monthly payments (complete sections 5 and 6 only)
- I wish to sell **all** shares in my plan **except** the minimum operating amount (complete sections 5 and 6 only)
- I wish to sell **some** of the shares in my plan (complete sections 3, 5 and 6 only)
- I wish to sell **shares in a specific fund, a set number of shares or a percentage of shares** from my plan (complete sections 4, 5 and 6 only)
- I wish to **close** my plan (complete sections 5 and 6 only)

## 3. To sell some of your investments held

**Do not fill out this section if you are selling ALL the shares in your plan – go straight to section 5.** Please state the value you wish to sell.

Amount in figures £  and amount in words

Please enter (month/year) of the Capital Protected Option(s) you wish to sell. You can find this information on your contract note.

Tick here if you wish to sell a Capital Protected Option(s)

**Please read the note on Capital Protected Options in the enclosed leaflet if you're unsure whether this section is relevant to you or call us on 0345 366 1513 for more information.**

## 4. Detailed withdrawal

To sell shares held in specific funds, a set number of shares or withdraw a percentage of value from the plan, please enter the details in the box below.

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## 5. Payment details Tick **one** of the options below as to where you would like your payment to be made to

- Home address
- Bank account *(Please note the bank account must be in the plan holder's name – complete details below)*

Bank/Building society	
Branch sort code	Account number
Account holder(s) **	
Building society roll number	

\*\*We will only make payment to the legal owner of the plan.

## 6. Please sign and date

Signature  Date

**Please ensure all relevant sections are completed before returning the form to us at HBOS Investment Fund Managers Limited PO Box 28132, 15 Dalkeith Road, Edinburgh EH16 9BF. You can submit your request by post or alternatively, you can fax your instruction to us on 0845 366 1514.**

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