

ADDITIONAL SUBSCRIPTION, REDEMPTION AND SWITCH FORM

FOR INSTITUTIONAL INVESTORS ONLY

(Please send the completed and signed form to: **State Street Bank Luxembourg S. A.**
49 Avenue J. F. Kennedy L-1855 Luxembourg. Fax: +352. 24. 52. 90. 38)

1. SHAREHOLDER INFORMATION

Company Name:

Contact Name: Tel.: Fax:

Company Address:

Email Address:

Account Number:

2. TRADE INSTRUCTION (please select the type of order)

2. 1. Please subscribe:

Date:
D D M M Y Y

Amount (with decimals): Currency:

Or No. of Shares (with decimals):

Name of Sub-fund: Class:

ISIN Code:

2. 2. Please redeem:

Date:
D D M M Y Y

Amount (with decimal): Currency:

Or No. of Shares (with decimals):

Name of Sub-fund: Class:

ISIN Code:

Payment: pay to the account on record please pay to the amended banking details (please provide the original signed amended banking details.)

