MorgenFund

Please send the **original** of this form to:

MorgenFund GmbH
Luxembourg branch
Boîte Postale 71
L-3201 Bettembourg

Client

**Surname(s),
First name(s)**

Address

**Securities
account**

C/X (Please enter full number, e. g. **X**1234567)

SEP/EI

SEPA direct debit mandate

☐ The client is identical to the account holder   ☐ Alternative account holder

Name of the alternative account holder

First name(s)

Street, number

Country   Postcode   Town

I hereby authorise MorgenFund GmbH, Luxembourg branch, creditor ID LU65 ZZZ 0000 0000 0000 0002 071, to take direct debit payments from my account. I herewith also instruct my bank/credit institution to honour any direct debit payments requested by MorgenFund GmbH, Luxembourg branch, on my account.

Important information: I have the right to request repayment of any amount debited within eight weeks of the debit date. The conditions agreed with my bank shall apply.

IBAN

BIC   Bank/Credit institution

Place, date

X

Signature (only for an alternative account holder)

X

☐ Please also use these bank details for any regular purchases.

I shall inform MorgenFund GmbH, Luxembourg branch, in a timely manner of any change to the bank account details provided.

Reference bank account set-up (only if the client is identical to the account holder)

☐ Please use the bank account cited above as the reference bank account.*

Deletion of existing direct debit mandates

☐ Please delete the mandate with the IBAN

Place, date

X

**Signature of 1st securities account holder
or of legal guardian for a minor**

X

**Signature of 2nd securities account holder
or of legal guardian for a minor**

X

If the client is a minor, the signatures of both parents or guardians are required. If one parent is the sole legal guardian, please confirm this and provide documentary evidence. Thank you. In the interests of security, please write **none** rather than leave a signature line blank.

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* Changes to your reference bank account can only be made in writing, and must include your original signature.