Fundsmith

Entity Bank Account Form

This form is for any Entity wishing to add or update its bank account details registered on file. These details will be used as a 'coverall', meaning that all withdrawals and distributions will be sent to the bank account details provided by the Authorised Signatories of the Entity via this form.

- Please complete this form in ink using **BLOCK CAPITALS.**
- Return the form to Fundsmith LLP, ICS Department, PO Box 12381, Chelmsford, CM99 2ET. If you wish to courier the form please send it to Fundsmith LLP, Adams House, 2 Springfield Lyons Approach, Chelmsford, Essex, CM2 5LG.
- If you need assistance completing this form, or if you have any other queries, please get in touch with us on 0330 123 3689/+44 203 975 1015 or FundsmithICS@uk.dstsystems.com.

Registered address			
Country			
Please supply the account number(s) that you require the new bank account to be applied to:			

Bank details and instructions					
Name of bank	Branch				
Account holder(s) name					
Sort code	Account number				
For international bank accounts, please provide the following information					
BIC/SWIFT	IBAN				

Declaration

We, being the Authorised Signatories acting for and on behalf of the Entity:

- Authorise Fundsmith LLP to release any monies in relation to withdrawals and distributions to the bank account identified on this form by electronic bank transfer, to the exclusion of any other bank account, the details of which have been provided to Fundsmith LLP in respect of the Fundsmith Account(s) identified on this form prior to the date hereof.
- Confirm that all information provided via this form is complete and accurate.
- Agree to provide such additional information as Fundsmith LLP may require for the purposes of processing this form and acknowledge that Fundsmith LLP shall be entitled to reject this form and any instructions given hereunder in circumstances where Fundsmith LLP, in its sole discretion, deems it necessary or appropriate to do so in order to comply with applicable anti-financial crime legislation (or related guidance) or other legal requirements or where Fundsmith LLP doubts the veracity of this form.
- The Entity hereby agrees to indemnify Fundsmith LLP in respect of all costs, losses, damages and expenses that are incurred by Fundsmith LLP and which arise from or in relation to Fundsmith LLP's acceptance in good faith of any incorrect instructions and/or information given by the Entity via this form.

Authorised Signatory				
Signature and Capacity		Date		
Title	Surname			
Forename(s) Position		Position		
Authorised Signatory				
Signature and Capacity		Date		
Title	Surname			
Forename(s) Position		Position		

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