

VT LAMBDA Investment Fund

Application Form for the Purchase of Shares

This form duly completed should be sent to:

Valu-Trac Administration Services, Orton, Fochabers, Moray IV32 7QE Tel: 01343 880344, Fax: 01343 880267, Email: lambda@valu-trac.com

If sent by email or fax please confirm to Valu-Trac Administration Services by telephone immediately and forward the original application form to the address above

Purchase Application

I/We, the undersigned, having received and read a copy of the Prospectus for the VT Sorbus Vector Funds ICVC ("the

Company") dated 1 July 2019 (together with any addendums or supplements thereto) and the Key Investor Information Document, hereby apply for such number of Shares in the Company as may be purchased with the amounts indicated below at the subscription price determined in accordance with the Prospectus:					
Fund:	VT LAMBDA Investment Fund				
Share Class:	A Income	✓			
Amount:		GBP / shares	(please delete as appropriate)		
Details of Applicant(s)					
	First Holder				
Company/Nominee Name					
or Title					
Surname					
Forenames					
Address					
Postcode					
Country					
Telephone					
Email					
	Joint Holder(s)				
Title & Full Name					
Title & Full Name					
Title & Full Name					
Mailing Address (if different from the address of the First Holder)					
Title & Full Name					
Address					
Address					

Bank Details of Applicant				
Name of Bank Address				
Account Name				
Account Number Bank Sort Code				
or Bank Swift Address or Bank ABA Number Distributions (if applicable) v	vill be paid to the bank account above			
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Data Protection				
For full information on how VT processes personal information and what your rights are, please see our Privacy Policy online at www.valu-trac.com.				
FATCA Declaration of U	I.S. Citizenship or U.S. Residence for Tax Purposes			
Please tick either (a) or (b) a	and complete as appropriate.			
a) I confirm t	hat I am not a U.S. citizen and/or resident in the U.S. for tax purposes.			
	hat I am a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal dentifying number (U.S. TIN) is as follows:			
CRS Declaration of Tax Residency				
Please indicate all countries in which you are resident for tax purposes and the associated Taxpayer Identification Number(s) in the below. Please see the CRS Portal for more information on Tax Residency.				
Country of Tax Residency	Tax ID Number (UK Individuals should use their UK National Insurance Number)			
a) I confirm to taxpayer in the below. Please indicate all countries Number(s) in the below. Please indicate all countries number (s) in the below.	hat I am not a U.S. citizen and/or resident in the U.S. for tax purposes. hat I am a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal dentifying number (U.S. TIN) is as follows: Residency s in which you are resident for tax purposes and the associated Taxpayer Identification ase see the CRS Portal for more information on Tax Residency.			

Payment Method – Payment is by wire transfer only

Funds should be wired for value on the settlement date of this transaction which will have been agreed in advance with Valu-Trac Administration Services and which will be stated on the Contract Note issued to you by Valu-Trac Administration Services. If funds are received on any date other than this agreed settlement date they may be returned by the Bank.

Authorised Signatories					
This application is authorised by the following who is/are person(s) authorised to give all instructions and to take all actions on my/our behalf in connection with any Shares held by me/us in the VT LAMBDA Investment Fund.					
Name of Authorised Person(s)	Signature of Authorised Person(s)	Date			
Name of Authorised Person(s)	Signature of Authorised Person(s)	Date			
Any One to sign Any Two to sig	gn Separate list attached				
Note: If the authorised signatory listing is a separate document forwarded with the original application, this listing needs					
to be accompanied by an original or certified copy of the company's mandate which approves the signatory listing.					
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If you have any questions please contact Valu-Trac Administration Services on 01343 880344 or lambda@valu-trac.com.

Anti-Money Laundering Requirements

Please provide the following information to Valu-Trac Administration Services

Corporate entity

Original or certified copy of certificate of incorporation showing existence and legality of company;

Certified copy of Memorandum and Articles of Association;

List of directors names, occupations, residential and business addresses and dates of birth;

Certified copy of authorised signatory list, including specimen signatures;

Certified minutes (resolution) or other properly authorised mandate authorising the investment to be made;

AND For a private company, please also provide:

For at least two directors: (unless the company has only one director)

Certified* copy of passport including a clear reproduction of the photograph of the individual concerned; AND

Two of the following:

Original utility bill (not older than 3 months)

Original bank statement (not older than 3 months)

Original of any other documentation issued by a government agency, showing the residential address

AND

List of the names and addresses of shareholders holding more than 10% or more of the issued share capital of the company.

Trusts

Relevant extract of the Trust Deed which shows the power to invest;

Certified copy of authorised signatory list of the Trustee, including specimen signatures;

Certified minute (resolution) or other properly authorised mandate authorising the investment to be made;

AND For a private trust, please also provide:

Confirmation from the Trustee of the identity of the settlor and the beneficiaries, by satisfying for each party the requirements as set out under 'Individuals' below.

Individuals

Certified* copy of passport or drivers' licence;

Two original/certified* true copies of utility bills (not older than 3 months and with the same address as that on the application form).

Please note that for joint applicants, documentation in respect of each applicant is required.

Designated body within a Financial Action Task Force jurisdiction

Written confirmation on your headed paper that you are a designated body;

The name of the relevant regulatory authority by which you are regulated.

*Only a Commissioner of Oaths, a notary public, a lawyer / solicitor, an accountant, or a police official, acting in their official capacity as a representative of the applicant may certify identity.