

# Mandate Form

## For amendments to Account Details

### Important information – Please read before completing this form

This document must be read and completed in conjunction with the relevant COIF Charity Funds Scheme Particulars. Copies are available on our website, [www.ccla.co.uk](http://www.ccla.co.uk) by email to [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk) or by calling us on free phone 0800 022 3505.

This mandate will supersede any other instructions we hold.

This form should be completed in full in BLOCK CAPITALS using black ink.

All pages of this form should be returned to CCLA, Senator House, 85 Queen Victoria Street, London EC4V 4ET. Please ensure that all the required documents are enclosed as failure to do so may delay any future transactions.

Please provide all your COIF Charity Funds account numbers for which this mandate applies.

A separate form should be used if any of the Charity's accounts have different operating instructions.

The space provided in section 7 should be used to add more information on any section.

**Please call our Client Services Team on free phone 0800 022 3505 if you require any help with the form.**

## Section 1 About your Charity

Date (dd/mm/yyyy)

### 1.1 Your organisation's name

Do you wish to change the name of your organisation?

Yes      No

### 1.2 CCLA Account numbers for which this mandate applies

1.3 Is your charity registered with the Charity Commission for England & Wales?

Yes      **Please go to 1.4**      No      **Please go to 1.5**

### 1.4 Charity's registration number

**Please go to 1.6**

**Please continue overleaf**

**1.5** HM Revenue & Customs reference number

(You do not have to complete this section if you have provided a Charity Commission registration number in 1.4)

**Note: correspondence from HMRC showing your charity's name or Parish, address and HMRC reference number must be supplied in order to confirm charitable status.**

**1.6** Does your charity have an office address?

Yes **Please go to 1.7**

No **Please go to 1.8**

**1.7** Charity's office address

Postcode

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that data will only be used according to terms stated on page 12 and will be held securely.

**1.8** Is your charity also registered as a limited company?

Yes **Please complete sections 1.9,1.10,1.11 and 1.12**  
(If yes - please enclose a copy of Certificate of Incorporation.)

No **Please go to 1.12**

**1.9** Company registration number**1.10** Company name *(if different from charity name)***1.11** Company's registered address *(if different from 1.7)*

Postcode

**1.12** When does your charity's financial year end? (dd/mm)

**Note: Deposit account statements are issued quarterly at the end of March, June, September and December. Statements for the unutilised funds and deposit account certificates of balance are issued half yearly and can be sent to coincide with your year-end.**

**Please continue overleaf**

## Section 2 Authorising Trustees/Executive Directors' Authorisation

This section must be read, completed and signed by a minimum of two Trustees/Executive Directors who have the authority to act on behalf of the Charity. The Trustees signing this section on behalf of a registered charity must be named on the Charity Commission register. Executive Directors, such as CEOs, must be named as Directors on the Companies House register.

### Anti-Money Laundering

We may need to ask you for documentation to assist us in verifying your identity. We must verify your identity in accordance with regulatory requirements. We normally do this using electronic means but occasionally we have to ask for extra documents from you to complete this process.

### We represent, warrant and undertake that:

- We have read and understood the contents of the COIF Charity Fund Scheme Particulars for each fund we are invested in;
- We are authorised to act on behalf of the Charity;
- The correspondent and authorised signatories are known to us;
- We will notify CCLA of any subsequent changes to the authorising Trustees/Executive Directors', correspondent and/or authorised signatories
- If this mandate is being authorised by a sole trustee/executive director, it is understood that this is only permitted where there are no other trustees; and
- If the investing organisation ceases to be a charity we will inform CCLA immediately and disinvest

### We authorise you to:

- Conduct the account(s) as instructed in this mandate form;
- Accept faxed instructions that purport to be properly issued in accordance with this mandate form. We indemnify you against any costs or loss arising from your acting on such instructions.

## Operating Instructions

Charity Commission guidance states that accounts should be operated by at least two authorised signatories. We do however understand that this is not always practical for some charities. Do you wish for the account to be operated by:

Any one of the authorised signatories

Any two of the authorised signatories

## First Trustee/Executive Director

Name

Signature

Date (dd/mm/yyyy)

**First Trustee/Executive Director to complete sections 2.1 to 2.5**

## Second Trustee/Executive Director

Name

Signature

Date (dd/mm/yyyy)

**Second Trustee/Executive Director to complete sections 2.6 to 2.10**

**Please continue overleaf**

**2.1 First Trustee/Executive Director**

Title Forename

Middle name Surname

Date of birth (dd/mm/yyyy) Position

Daytime Telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that data will only be used according to terms stated on page 12 and will be held securely.

Home address

Postcode Date moved to this address (dd/mm/yyyy)

**If you have lived at this address for less than three years please provide details of your previous address below.**

Postcode Date moved to this address (dd/mm/yyyy)

**Please provide one or more of the following for identity checking purposes**

**Driving Licence number (Example: DILLI853185AS9AF)**

**Passport details**

Country Code

Expiry date (dd/mm/yyyy)

Passport number - 2nd line of machine readable zone

e.g. 4510164327

e.g. GBR

e.g. 6908061F

e.g. 9406236

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e.g. 14

**2.2** Will you be the correspondent for this account? (to whom all correspondence will be sent)

Yes **Please go to 2.3**

No **Please go to 2.4**

**2.3** If you are the correspondent and wish correspondence to be sent to the charity's office address (see section 1.7) tick here

**2.4** Will you be an authorised signatory for this account?

Yes

No

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**2.5** If you do not want to receive information on CCLAs other products and services, by post please tick here

**2.6 Second Trustee/Executive Director**

Title

Forename

Middle name

Surname

Date of birth (dd/mm/yyyy)

Position

Daytime Telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that data will only be used according to terms stated on page 12 and will be held securely.

Home address

Postcode

Date moved to this address (dd/mm/yyyy)

**If you have lived at this address for less than three years please provide details of your previous address below**

Postcode

Date moved to this address (dd/mm/yyyy)

**Please provide one or more of the following for identity checking purposes**

**Driving Licence number (Example: DILLI853185AS9AF)**

**Passport details**

Country Code

Expiry date (dd/mm/yyyy)

Passport number - 2nd line of machine readable zone

e.g. 4510164327

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e.g. 14

**2.7** Will you be the correspondent for this account? (to whom all correspondence will be sent)

Yes **Please go to 2.8**

No **Please go to 2.9**

**2.8** If you are the correspondent and wish correspondence to be sent to the charity's office address (see section 1.7) tick here

**2.9** Will you be an authorised signatory for this account?

Yes

No

Signature

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Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**2.10** If you do not want to receive information on CCLA's other products and services, by post please tick here

**Please continue overleaf**

## Section 3

### Correspondent

(To whom all correspondence will be sent) Only complete this section if the correspondent has not completed Section 2.

**3.1** Title

Forename

Middle name

Surname

Date of birth

Position

Daytime Telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that data will only be used according to terms stated on page 12 and will be held securely.

Home address

Postcode

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**3.2** Will you be an authorised signatory?

Yes

No

**3.3** If you wish correspondence to be sent to the charity's office address (see section 1.7) please tick here

**3.4** If you do not want to receive information on CCLA's other products and services, by post please tick here

## Section 4

### Additional Authorised Signatories

*Please photocopy pages of section 4 if you require more than two additional signatories*

#### 4.1 Additional Authorised Signatory

Title

Forename

Middle name

Surname

Date of birth

Position

House number or name

Postcode

Daytime Telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that data will only be used according to terms stated on page 12 and will be held securely.

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**4.2** If you do not want to receive information on CCLA's other products and services, please tick here

#### 4.3 Additional Authorised Signatory

Title

Forename

Middle name

Surname

Date of birth (dd/mm/yyyy)

Position

**Please continue overleaf**



House number or name

Postcode

Daytime Telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that data will only be used according to terms stated on page 12 and will be held securely.

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**4.4** If you do not want to receive information on CCLA's other products and services, by post please tick here

## Section 5

### Changing the subtitle of your account

**5.1** Do you wish to add or change the subtitle of an account?

Yes

No

**Please go to Section 6**

Account number

New subtitle

## Section 6

### Nominated bank details

**6.1** Do you wish to change your **income payment** instructions?

Yes **Please go to 6.2 and/or 6.3**

No **Please go to 6.4**

**6.2** For COIF Charities Deposit Fund accounts only

Add deposit interest earned to the balance of this account

**OR**

Pay interest to another COIF Charities Deposit Fund account number

**OR**

Pay interest to a bank account in the name of depositing charity:

Bank/Building society name

Branch Title

Account name

Sort code

Account number

Building society reference (if applicable)

***Important : Payments may only be made to a bank account in the charity's name. Please see Section 9 for the acceptable documents required to verify the bank account.***

**6.3** For COIF Charities Investment Fund, COIF Charities Ethical Investment Fund, COIF Charities Fixed Interest Fund, COIF Charities Global Equity Income Fund and COIF Charities Property Fund accounts only.

Pay dividends to our COIF Charities Deposit Fund account number

**OR**

Pay dividends to our charity's bank/building society account (shown above)

**Please continue overleaf**

**6.4** Do you wish to change the bank account details where **withdrawals are paid**?

Yes      No      **Please go to section 7**

**Send withdrawal payments to:**

Bank/Building society name

Branch Title

Account Name

Sort code

Account number

Building society reference (if applicable)

***Important: Payments may only be made to a bank account in the charity's name. Please attach a certified copy of a bank statement confirming these details. See section 9 for further information.***

## **Section 7**

### **Additional Information**

**7.1** Please provide us with an explanation if the authorising trustees are not recorded on the Charity Commission register. The register can be viewed at [www.charitycommission.gov.uk](http://www.charitycommission.gov.uk) (this applies to Charities registered with the Charity Commission for England and Wales only).

**7.2** Notes

## Section 8

### Email Instructions Authority

Instructions on a CCLA form, sent by e-mail to us as a PDF, and signed in accordance with the account mandate, can be accepted if we have the relevant email instructions authority.

Please complete this section if you would like us to accept instructions by email.

**Important Information:** A PDF version of a CCLA form attached to your email is your instruction to us and should be sent to [correspondence@ccla.co.uk](mailto:correspondence@ccla.co.uk). Do not send the original documentation in the post and do not resend the email and/or the attachment as your instruction may be processed again. This mailbox will automatically upload the PDF for processing so any additional information contained in the body of the email will not be seen. If you have any additional information about the instruction please send your email and PDF to [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk)

### Authority to accept email instructions

In consideration of CCLA agreeing to accept from us, notwithstanding the terms of the relevant mandate, from time to time instructions purporting to come from us in the form of email instructions in relation to our account(s), we confirm and accept that CCLA does not accept responsibility for, and we will not seek to hold CCLA liable for any actions, proceedings, claims, losses, damage, costs and expenses that may be suffered or incurred as a result of CCLA accepting, or acting upon, instructions that CCLA reasonably believes have come from us, or have been given on our behalf. We accept responsibility for any losses or costs that might be incurred as a result of the cancellation of any purchase or sale of units carried out as a result of CCLA accepting, or acting upon, instructions that CCLA reasonably believes have come from us or have been given on our behalf.

### Authorisation

Name

Signature

Date (dd/mm/yyyy)

Name

Signature

Date (dd/mm/yyyy)

## Section 9

### PLEASE TICK TO CONFIRM ALL OF THE DOCUMENTS ARE ENCLOSED:

If you have provided us with a new nominated bank account in Section 6, please return the form with one of the following:

- An original Paying in Slip
- An original Cheque marked 'Void'
- A certified copy of a Bank Statement

If you are sending a certified copy of a Bank Statement the certification must be carried out by one of the following listed below:

- Representative of an FCA or EU equivalent regulated firm (e.g. bank manager)
- Solicitor / Accountant / Notary
- Church Minister
- Director of a VAT registered Charity
- Officer of the British Armed Forces
- Government Department Official
- Official of an overseas Embassy, Consulate or High Commission
- Any CCLA Investment Management Limited employee

**The professional certifying the bank statement should be a different person to anyone named in the form. They should write 'Certified to be a true copy of the original seen by me' on the document, sign and date it. They should then print their name under the signature, adding their occupation, address and telephone number.**

For organisations that have provided a HMRC reference, please send a copy of a document from HMRC showing the Charity's name and reference number to confirm charitable status.

A copy of minutes of a recent trustee meeting for the purpose of confirming the relationship of the authorising trustee(s) to your Charity. The minutes should not be any older than 12 months and the authorising trustees/Directors should be named in the minutes.

### Data Protection Regulation (GDPR)

In accordance with our regulatory obligations, and as set out in our Privacy Notice, information will be retained for a minimum of six years after the end of our relationship with you.

- As required under GDPR, consent must be given before any communication can be sent to your personal e-mail address about services other than those already provided.
- At any time, you can ask for your personal data to be removed from CCLA databases unless it is required to be retained for legal or regulatory reasons. Please email us at [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk) or telephone us at 0800 022 3505.
- If you change your email address, or any of the other information we hold is inaccurate or out of date, please email us at [client\\_services@ccla.co.uk](mailto:client_services@ccla.co.uk)
- You can contact the CCLA office to receive a copy of any of your personal data currently held by us once we have received proof of your identity.
- Any details you give us will be held in accordance with current data protection legislation.
- We will not share your personal data with third parties, unless we have your permission to do so in accordance with your contract with us, or we are required to do so by law.
- We do not sell any personal data held.
- When you give us personal data, we take steps to ensure that it is treated securely. Information you send to us electronically is transmitted over the internet, but this cannot be guaranteed to be 100% secure. As a result, while we strive to protect your personal data, CCLA cannot guarantee the security of any information you transmit to us, and you do so at your own risk. Once we receive your information, we make our best effort to ensure its security on our systems mainly in password accessed databases.
- We do not collect information automatically from our website.
- Personal data will be retained in CCLA's systems which are password protected.

Please see the website for details of CCLA's Privacy Notice and full details of CCLA's Data Protection Policy are available on request.

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Senator House, 85 Queen Victoria Street, London EC4V 4ET  
Freephone: 0800 022 3505

CCLA Fund Managers Limited (Registered in England No. 8735639, whose registered address is: Senator House, 85 Queen Victoria Street, London EC4V 4ET, is authorised and regulated by the Financial Conduct Authority and is the manager of the COIF Charity Funds (registered charity Nos. 218873, 803610, 1046249, 1093084, 1121433 and 1132054. Under the EU Money Market Fund Regulation 2017/1131, the COIF Charities Deposit Fund is categorised as a short-term LVNAV Money Market Fund.