

AMENDMENT FORM

PROTECTIVE WORLD FUND



Protective World Fund (PWF), a sub-fund of Pandion Fund, is an initiative of Wellscott Capital Management B.V.



Submit your
amendment



Your amendment
is being processed



Your amendment is
confirmed by e-mail



The information you provide in this form is required to process amendments to your subscription and will be shared with AssetCare, the Administrator of Protective World Fund, a sub-fund of Pandion Fund. AssetCare will handle the amendment(s) and will contact you in case additional information is required. Some of the requested information, such as the reason for changes, arises from legal obligations.

Words and expressions in this form starting with a capital letter have the meaning explained in the Prospectus.

Please complete, date, and execute the Amendment Form and send it to investors@assetcare.nl (with info@wellscott.com in CC) or by express mail to AssetCare Fund Services B.V. at the address set forth below. Please do not hesitate to contact AssetCare Fund Services B.V. if you need any help completing the Amendment Form and/or have any questions about this form:



+31 (0) 20 244 27 15

Available each working day from
08:00 to 18:00



investors@assetcare.nl

Our aim is to answer your email
within 24 hours



AssetCare Fund Services B.V.

Mondriaan Tower, 19th floor
Amstelplein 40C
1096 BC Amsterdam



Do you want to open a webpage from this form? Make sure this form is saved beforehand to avoid that the data that you have entered is lost.

INVESTOR DETAILS

Please enter the requested information in the table below.

Name of Investor

- What amendment would you like us to process? ☐ Modify details of Investor → [see section below](#)
- ☐ Additional subscription → [see page 4](#)
- ☐ Redemption (full or partial) → [see page 5](#)

MODIFY DETAILS OF INVESTOR

Select only the information that you like to have amended and enter both the current and the new details.

	Current	New
☐ Company name		
☐ Address		
☐ Email address		
☐ Phone number		
☐ Tax residency/residencies		
☐ IBAN		
☐ Account holder name		
☐ Employment type		
☐ Profession		
☐ Authorized representative		
☐ Director(s)		
☐ (Pseudo) UBO('s)		
☐ PEP status		
☐ Other:		

Please provide an explanation to the amendment:

ADDITIONAL SUBSCRIPTION

Please indicate the additional subscription amount and from which bank account the deposit(s) will be made.

Subscription amount	€
IBAN / bank account	
Account holder name	

In the table below, please select the sources explaining the origin of the funds, and include the percentage of each source. The total of the percentages should be 100%.

☐ Salary	%	☐ Savings	%
☐ Income from entrepreneurial activities	%	☐ Income from investments	%
☐ Property	%	☐ Retirement benefits	%
☐ Inheritance/gift	%	☐ Family wealth	%
☐ Other:			%

The minimum amount for an additional subscription is € 5,000. The Amendment Form should be received at least ten (10) Business Days prior to the relevant Subscription Date.



Please include a copy of a recent bank statement showing the IBAN, account holder name and address if you have not previously made a transfer to the Fund from this account. The name associated with the bank account from which the subscription amount is transferred must match the name(s) of the Investor.

DEPOSIT INSTRUCTIONS (IN CASE OF AN ADDITIONAL SUBSCRIPTION)

You will receive the deposit instructions from AssetCare (investors@assetcare.nl) after your additional subscription has been approved. The funds must be received in the bank account of the Legal Owner ten (10) Business Days before the Subscription Date.

REDEMPTION (FULL OR PARTIAL)



The redemption request should be received at least twenty (20) Business Days prior to the relevant Redemption Date. The redemption of Participations is enforced on the Redemption Date. The Prospectus contains more information about, for example, the valuation and the payment of funds.

The Redemption Date is generally the first Business Day of the month. Once the redemption is processed, you will receive a transaction note with an overview of your Participations.

Please indicate the redemption amount or number of Units you want to redeem.

Type of redemption	☐ Full redemption	☐ Partial redemption ¹
What is the amount of Units you wish to redeem?	Amount	Units
	€	Number ¹
IBAN / bank account		
Account holder name		
What is the reason you want to redeem Units?		



Please include a copy of a recent bank statement showing the IBAN, account holder name and address if you have not previously made a transfer to the Fund from this account. The name associated with the bank account to which the redemption amount is transferred must match the name(s) of the Investor.

¹ A partial redemption is only permitted if the investor subsequently holds a minimum of € 5,000 in Units. It is determined based on the data on the last Valuation Date prior to the next Redemption Date whether this is the case.

SIGNATURE PAGE

By signing the Amendment Form you declare that you:

- the information you provided in this Amendment Form is, to the best of your knowledge, accurate;
- to agree again with the declarations from the Subscription Form;
- understand and accept the information in the Subscription Form, the Terms and Conditions and the Prospectus;
- agree that the Fund Manager will use your data to – next to the reports as described in the Prospectus – periodically provide information regarding the Fund, your Units in the Fund and other investment related matters.

This form and the required documents will be used to process your amendment and perform subsequent services. The amendment cannot be processed if the Amendment Form is incomplete.

First Investor	Second Investor ²
Date	
City	
Name	
Signature ³	



Please note that this form should be saved before opening a web page.

² Only required for a joint subscription or for a corporate subscription with multiple authorized representatives.

³ Whether you can provide a digital signature depends on the program you use to open the file and your settings. Unable to provide a digital signature? In that case, print out the form, sign by hand, and scan or photograph the signed document.

SUBMIT YOUR AMENDMENT



AssetCare will contact you by phone or email if additional information or documentation is required.

Please send a signed form to investors@assetcare.nl (with info@wellscott.com) or by regular mail to AssetCare. You will be notified by email when your amendment is received and being processed and/or should we need additional information.



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