

APPOINTMENT OF AN INVESTMENT MANAGER

MEXICO

Utmost Wealth Solutions is the brand name used by a number of Utmost companies. This item has been issued by Utmost Luxembourg S.A.

Words in the singular include the plural and vice versa. A reference to one gender includes a reference to the other gender.

Cell Number

I/We,

Surname(s) First name(s)

Address

Street/N°

City/County Postcode

Country

Surname(s) First name(s)

Address

Street/N°

City/County Postcode

Country

Surname(s) First name(s)

Address

Street/N°

City/County Postcode

Country

Surname(s) First name(s)

Address

Street/N°

City/County Postcode

Country

(the Policyholder(s) of the above referenced Policy) hereby request that Utmost PCC Limited appoint the following as Investment Manager of the assets of the internal life assurance fund (the "Fund") to which the Policy is to be linked:

(to be completed even where the Fund is to be managed by the Policyholder)

Name of Investment Manager			
	("the Investment Manager") or Successor Entity		
Contact person			
Address			
Street/N°			
City/County		Postcode	
Country			
Telephone		Fax	
E-mail			

I/we confirm that I/we am/are satisfied that the Investment Manager is suitable to manage the assets of the Fund. In assessing the Investment Manager's suitability, I/we have considered his knowledge of the investment markets, and his general experience of financial services.

I/we confirm that I/we fully understand the legal and tax implications of this appointment and have taken such independent advice, as I/we deem necessary in this respect. I/we hereby jointly and severally accept full responsibility for all consequences of the appointment of the investment manager named above to manage the assets of the Fund and I/we hereby agree to hold harmless and indemnify Utmost PCC Limited against all and any consequences of this appointment, including, but not limited to, matters of investment performance, investment selection, and taxation.

I/we understand that the fund will be valued quarterly and that the agreed fees of the adviser,		% per annum, will be charged to the
Policy and paid directly to the adviser on a quarterly basis. The investment manager will instruct		to execute all investment transactions.

I/We request that the Underlying Assets of the insurance fund be managed according to the following broad investment strategy. The day-to-day management of the Policy will be left to the discretion of the Investment Manager.

PLEASE COMPLETE THE INVESTMENT STRATEGY	ASSET ALLOCATION (%)	
	MINIMUM	MAXIMUM
Cash/Money Market instruments/Money Market Funds		
Equities/Equity Funds		
Bonds/Bond Funds		
Alternative Investments		
Property Funds		

Market fluctuations may cause the composition of the Portfolio to move beyond the minimum and maximum asset allocation percentages shown above. It is the responsibility of the Investment Manager to ensure that asset allocations are otherwise respected and to correct all deviations as soon as is reasonably practicable.

When added together the figures in the column entitled 'Maximum' must equal at least 125%.

If a more detailed investment strategy is preferred (e.g. with preference for certain asset classes, geographical areas, economic sectors, etc.), please request a separate Investment Strategy Form from the Insurer.

(Please be aware that the choice of strategy must be compliant with the strategy selected in the application form)

Or attach existing investment management mandate:

Policyholder 1

SIGNATURE

Date

d	d	m	m	y	y	y	y
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Place

Policyholder 2

SIGNATURE

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Place

Policyholder 3

SIGNATURE

Date

d	d	m	m	y	y	y	y
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Place

Policyholder 4

SIGNATURE

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Place

Policyholder 1

SIGNATURE

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Place

Policyholder 2

SIGNATURE

Date

d	d	m	m	y	y	y	y
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Place

Policyholder 3

SIGNATURE

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Place

Policyholder 4

SIGNATURE

Date

d	d	m	m	y	y	y	y
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Place

To be signed by the Policyholder(s) who expressly accepts to invest in this category of assets.

ACCEPTANCE BY INVESTMENT MANAGER

I/We

hereby accept the appointment as Investment Manager of the Fund on the terms set out herein. I acknowledge that as investment manager, I am responsible for the cash management of the Fund and will retain sufficient liquidity to enable it to meet its day-to-day commitments. The proceeds of any investment sale shall not be invested until value has been received from such sale.

Investment Manager

SIGNATURE

Date

d	d	m	m	y	y	y	y
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Place

Stamp

ACCEPTANCE BY UTMOST PCC LIMITED

Utmost PCC Limited hereby signifies its agreement to the above request and appoints the Investment Manager to manage the assets of the Fund on a discretionary basis, in accordance with the investment strategy mentioned above.

Utmost PCC Limited

SIGNATURE

Date

d	d	m	m	y	y	y	y
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Place

Stamp

DEFINITION

“Successor Entity”:

Any corporation into which the Investment Manager may be merged or converted or any corporation with which the Investment Manager may be consolidated or any corporation resulting from any merger, conversion or consolidation to which the Manager shall be a party, shall be the successor of the Investment Manager. Utmost PCC Limited shall notify the Policyholder(s) of a possible change of identity of the Investment Manager. In the absence of action by the Policyholder(s) within 30 days after such notification, the present appointment shall continue in effect.

A WEALTH *of* DIFFERENCE

www.utmostinternational.com

Utmost PCC Limited (No. 37269) also trading as Utmost Wealth Solutions, is incorporated in Guernsey. It is authorised and regulated by the Guernsey Financial Services Commission to conduct long term business

Registered office address: Utmost House, Le Truchot, St Peter Port, Guernsey GY1 1GR