
ADDITIONAL SUBSCRIPTION FORM

DMS UCITS Platform – TRG Emerging Markets Local Debt UCITS Fund
(the “Fund”)

Please forward this Additional Subscription Form by fax to the Administrator at the following contact details before the applicable dealing deadline. Investor trades can be accepted by Fax. Investor trades cannot be accepted by phone. Failure to complete this Additional Subscription Form correctly may result in a delay in the processing of your subscription.

The Bank of New York Mellon SA/NV, Luxembourg branch
 2-4 rue Eugène Ruppert, L-2453 Luxembourg
 GRAND DUCHY OF LUXEMBOURG

Phone: + 352 24 52 5717
Fax: + 352 24 52 4255

Section 1 – Shareholder Details

Please note that the Application Form together with any additional documents (depending on the investor type) requested should be delivered in original format (by post) In case of Application form sent by fax, the original must follow.

Account Number: _____

Registered Name: _____

Registered Name #2 (Joint shareholders only) _____

Registered Name #3 (Joint shareholders only) _____

Address of Shareholder(s): _____

Section 2 – Additional Subscription Details

I/We wish to make an additional subscription for Shares in the Share Class indicated below and for the amount indicated below.

CLASS	CURRENCY	AMOUNT

Section 3 – Payment / Settlement

Please make payments as follows noting that payments must come from an account in the name of the applicant and must be received as per the terms of the Fund documentation. No third-party payments will be accepted.

US DOLLAR – USD

Bank: The Bank of New York Mellon SA NV
SWIFT BIC: IRVTBEBB
For Credit to: 9381918400 TRG EM MRKTS LOCAL DBT UCITS FD SR
Account Name: TRG EM MRKTS LOCAL DBT UCITS FD SR
Account Number: 9381918400
Reference: (Please insert applicant name)

Section 4 – Investor Bank Details

US Dollar bank account details from which the subscription settlement is being made. Payments must come from an account in the name of the applicant and be received as per the terms of the Fund documentation. No third-party payments will be accepted.

Bank Name:
Bank Address:
Swift/Sort Code:
IBAN:
Account Name:

Section 5 – AML

PEP SECTION - Where there is a PEP¹ associated with this account, please provide the following confirmation in relation to this transaction:

(a) Source of Funds

Please insert below details of the origin of the particular funds which are the subject of this investment and how they were acquired

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.....
.....

¹ Politically Exposed Person – This term shall have the meaning ascribed to such term in the applicant’s original Application Form and includes, among others: an individual who is a senior government, political or military official; any corporation, business or other entity that has been formed by or for the benefit of such a person; and an immediate family member or close associate of such a person.

Section 6 – Confirmations

This Additional Subscription Form should be read in conjunction with the Prospectus and Supplement of the Fund and your initial Application Form. All capitalised terms herein have the meanings assigned to them in the Prospectus, the Supplement or the applicant’s original Application Form (as appropriate).

Section 7 – Confirmations

I/We hereby agree and confirm, in signing below, that i) I/we am/are irrevocably subscribing for Shares in the Fund as detailed above, and that ii) all information provided, and all representations and warranties made, in my/our initial Application Form and the documents provided therewith are true and correct as of the date hereof and that my/our initial Application Form shall hereby be amended so as to refer to and include the subscription described above in addition to each previous subscription referred to therein.

Signature (1): _____

Print Name: _____

Capacity of Authorised Signatory: _____

Date: _____

Signature (2): _____

Print Name: _____

Capacity of Authorised Signatory: _____

Date: _____