

## Request to Drawdown Proceeds

Date

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Institution Name

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Institution Address

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Subject      **Policy / Bond / Pension No.** \_\_\_\_\_

Dear Sir / Madam

I wish to draw down the maturity proceeds of the above detailed policy / bond / pension.  
[circle as appropriate]

Please find enclosed:

- The original policy document (if applicable)
- Lost Policy Document (if applicable)
- Released Deed of Assignment (if applicable)

Please send the encashment cheque to my financial adviser \_\_\_\_\_ in  
Acumen & Trust Limited.

Yours sincerely

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Date

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Date

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*Please return the completed form to your Acumen & Trust adviser at:  
4 / 5 The Avenue, Beacon Court, Sandyford, Dublin 18.*