

This form is for completion if you wish to delegate signing authority over your holding(s) to your professional adviser, lawyer, solicitor, stockbroker, bank manager, accountant, relationship manager or an alternative party ("Attorney").

To:
 BlackRock (Channel Islands) Limited and Investor Services Centre and BlackRock Fund Managers (Isle of Man) Limited
 Forum House BlackRock (Luxembourg) S.A. Belgravia House
 Grenville Street B.P. 1058 34/44 Circular Road
 St Helier L-1010 Douglas
 Jersey JE4 8RL Luxembourg Isle of Man IM1 1QW

Delegation of Authority

Until you receive written notice to the contrary from me/us, please act upon instructions and written confirmations of such instructions given on my/our behalf by my/our Attorney whose name appears below in respect of purchases, redemptions and conversions or any other matters concerning my/our holding(s) in any or all funds administered by you. For an umbrella fund, this authority will apply to all sub-funds.

Shareholders should note that although responsibility for giving written confirmation of redemption instructions is delegated to an Attorney, redemption proceeds will only be paid to the Registered Shareholder's account.

All rights granted to the Attorney hereunder shall be deemed to be terminated with immediate effect upon the death of the Shareholder.

Attorney's details

Name and address	Telephone number	Attorney's Stamp <i>(if applicable)</i>
<input type="text"/>	<input type="text"/>	
<input type="text"/>	Fax number <input type="text"/>	
<input type="text"/>	Attorney's signature <input type="text"/>	
Postcode		

Holders details

Name of holder(s) (in the order stated on the original application form) and Registered address of holding

Client reference number *(if known):*

Signature(s) of holder(s)

All joint holders must sign. In the case of a corporate holder, this form must be signed by a duly authorised official(s) whose representative capacity must be stated.

Signature of holder 1	Signature of holder 3
<input type="text"/>	<input type="text"/>
Signature of holder 2	Signature of holder 4
<input type="text"/>	<input type="text"/>
	Dated <input type="text"/>

For office use only	Actioned by	Original form held in	Copy to
Jersey			
Luxembourg			
Isle of Man			