

**THE AIFMD RULES AND GUIDANCE, 2021**

**FORM DST 2021**

GUERNSEY DEPOSITARY QUARTERLY RETURN

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| **NAME OF AIF(S)** | **DOMICILE OF AIF(S)** | **BASE CURRENCY OF**  **AIF(S)** | **NUMBER OF**  **INVESTORS IN AIF(S)** | **TOTAL NET ASSET VALUE FOR EACH AIF(S)** |
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**DECLARATION BY THE GUERNSEY DEPOSITARY**

**FORM DST 2021**

I declare that to the best of my knowledge and belief the information given above is complete and correct.

Signed Date

Name and position

(See Note 1)

Institution

Address

Telephone number

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**The Data Protection (Bailiwick of Guernsey) Law, 2017**

For the purpose of the Data Protection (Bailiwick of Guernsey) Law, 2017 please note that any personal data provided to the Commission will be used by the Commission to discharge its regulatory activities and statutory functions. Further information, relating to the Commission’s Data Protection policy, can be located on the website at [www.gfsc.gg/data-protection](http://www.gfsc.gg/data-protection)

**Notes:**

Note 1: The form must be signed by a director or in relation to an unincorporated body, any member of the committee or similar governing body.

If more space is needed the answers should be written on a separate signed and dated sheet of paper and referenced appropriately.

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