

Transaction Form

For Redemption of Units



For assistance in filling this form, speak with our customer care executives at 0800-00026 or sms HELP to 8258.

Please 0340-8253863 in your smart-phone to avail smart Whatsapp self service. type HI and send.

You can submit the form at your nearest UBL Fund Managers Investment Center, designated UBL Branches or authorized distributor outlets. You can also courier the form to: UBL Fund Managers - Operations Office, 4th Floor, STSM Building, Beaumont Road, Civil Lines, Karachi, Pakistan.

General Instructions & Guidelines

- 1) This form is for use by existing Unit Holders who want to make the transactions in their account for Redemption (Withdrawal) of units. Please use a separate form for each transaction type (multiple transaction types on a single form is not allowed)
- 2) Fill the form in block letters and in legible handwriting to avoid errors in application processing.
- 3) Fill the form yourself or get it filled in your presence. Do not sign and/or submit blank forms.
- 4) If any alteration is made, a countersign is mandatory.
- 5) Applications incomplete in any respect and/or not accompanied by required documents are liable to be held or rejected until complete requirements are fulfilled.
- 6) It is the responsibility of the applicant to carefully read and understand the guidelines and instructions provided in this form and the terms and conditions in the Offering Document(s) of the relevant schemes prior to submitting the form.
- 7) Application will be processed as per cut-off timings for the Fund(s) / Plan(s). For cut-off timings sms CT to 8258.

1 Principal Unit Holder Information (Mandatory)

Customer ID

CNIC Number

Principal Unit Holder's Name (Mr/Ms/Mrs/Messrs)

2 Joint Unit Holder Information (If Applicable)

1. Name 2. Name

3 Transaction Type - Redemption (Withdrawal)

	Name of Scheme	Type of Units	Amount (Rs.) / No. of Units / %	Units Mode of Holding
1				<input type="checkbox"/> A/c Statement <input type="checkbox"/> Physical Certificate <input type="checkbox"/> CDS Holding
2				<input type="checkbox"/> A/c Statement <input type="checkbox"/> Physical Certificate <input type="checkbox"/> CDS Holding

1. Redemption (withdrawal) amount (Rs. / Units) in words

2. Redemption (withdrawal) amount (Rs. / Units) in words

If physical certificates are held, please attach certificates with this form, and provide: Certificate No. No of units

Incase of CDC holding, please provide: Participant ID/IAS ID Client/House/Investor A/c #

I would like to receive encashment amount in form of ☐ Cheque ☐ DD/Pay Order ☐ Online A/C Transfers**

Bank Account Number Bank Account Title

Bank Name & Branch Bank Address

Guidelines & Instructions

1) Zakat will be deducted incase Zakat Affidavit (exemption) has not been submitted. 2) Original (physical) certificates must be surrendered (if issued) along with this form. Partial encashment/redemption of physical certificates is not allowed. 3) Back-end load (charges) will be applicable as per Constitutive Documents of the Fund(s)/Investment Plan(s). 4) Incase of CDS (Electronic) Holding, if sub-account with broker is held, copy of 'Redemption Request Report' (extracted from CDS System by your broker or CDC IAS) to be submitted along with this form. 5) Incase the amount available in a fund/plan is less than the requested amount, the entire amount will be redeemed. 6) Incase of encashment/redemption from an investment plan, units will be redeemed from the underlying fund(s) in accordance to the weightages assigned to that plan. 7) Partial encashment/redemption from an investment plan will only be allowed subject to maintaining of minimum investment amount in the plan. 8) Incase of encashment/redemption from an investment plan, Insurance/Takaful Coverage (if offered) may be withdrawn if minimum amount required for coverage in that plan is not met. Inter Branch Online Transfer facility is available with selected banks. For list of Banks, sms OT to 8258.

** I hereby indemnify UBL Fund Managers against any liability, loss or damages, compensation, legal proceedings arising as a result of the inaccurate and/or incomplete information provided by me for the execution of Online Account Transfers.

** Online Account Transfers include Inter Branch Online Transfer, Inter Bank Fund Transfer (IBFT -For selected banks of 1-link) and Real Time Gross Settlement (RTGS). Registrar (UBL Fund Managers Limited) shall decide appropriate mode of payment for "Online Account Transfers". Charges applicable on Online Account Transfers will be borne by Unit Holders.

** Please provide complete and accurate account numbers with branch details. In case of incorrect or incomplete information, Cheque / Pay Order will be issued.

** Due to any technical reason, fund transfer may be delayed. In such case, please immediately inform at our Toll Free Customer Care No. 0800-00026. Funds are transferred as per TATs defined by State Bank of Pakistan, 1-Link and respective Banks.

4 Declaration & Signature(s)

I/We hereby acknowledge having read and understood the Supplementary Offering Document(s) of the Plan(s), the Trust Deed(s) and Offering Document(s) of the Fund(s)/Plan(s) along with details of Sales Load to be deducted (if any) including taxes and hereby apply for transaction(s) as indicated in this form. I agree to abide by the terms, conditions, rules, and regulations applicable on the Fund(s) and Plan(s). I have carefully read and completed all applicable sections of this form that govern the transaction(s) mentioned herein and acknowledge understanding the risks involved prior to submission of this form.

Note: Incase of 'Joint Operating Instructions' signatures of both the Principal Unit Holder/Primary Guardian and Joint Unit Holder/Alternate Guardian are mandatory. Official Stamp required incase of Corporate Unit Holder.

Date
(dd - mm - yy)

Principal Unit Holder's Signature

1.

2.

3.

Joint Unit Holder(s) Signature(s)

For Office Use Only

Distributor Name of Agent Sub-Agent

Reference/Agent No. IC/Location Remarks

Processing Checklist

Processing checklist to be filled by Processor / CRE. Please tick (✓) against checklist item after validating the form.

- | | | | | | |
|--------------------------------------|--|--|--|-------------------------------------|---|
| <input type="checkbox"/> Customer ID | <input type="checkbox"/> Title | <input type="checkbox"/> Fund / Plan / Product Name | <input type="checkbox"/> Amount / Units / %age | <input type="checkbox"/> TS2 Number | <input type="checkbox"/> Time stamp (affixed) |
| <input type="checkbox"/> Holding | <input type="checkbox"/> Signature (as per Operating Instructions) | <input type="checkbox"/> Payment Mode (Default Cheque) | <input type="checkbox"/> Bank account detail for online transfer | | |