



Habib Asset Management Limited

REDEMPTION OF UNITS FORM

For office Use Only:

Redemption No. _____

INFORMATION ABOUT THE PRINCIPAL ACCOUNT HOLDER (PLEASE USE BLOCK LETTERS)

Name: Mr./ Ms./ Mrs./ M/s	Folio Number :	Date
	CNIC/ NTN* No.	

DETAILS OF REDEMPTION

Name of Fund :

No. of Units :

 Details of Unit Certificates : PHYSICAL UNITS NOT ISSUED PHYSICAL UNITS ISSUED & ATTACHED AS PER DETAILS GIVEN BELOW :

Certificate Nos.

_____	_____
_____	_____
_____	_____

Denomination

<input type="checkbox"/> 10 x _____ = _____	<input type="checkbox"/> Jumbo _____
<input type="checkbox"/> 50 x _____ = _____	
<input type="checkbox"/> 100 x _____ = _____	<input type="checkbox"/> Fractional _____
<input type="checkbox"/> 500 x _____ = _____	

PAYMENT INSTRUCTIONS

 Please send cheque at my registered address Please transfer directly to my already provided bank account

BANK NAME _____ BRANCH _____ BANK A/C # _____

AUTHORIZATION BY UNIT HOLDERS

I/ We undersigned would like to encash my/ our investment as per the above details, I/ We hereby acknowledge having read and understood the relevant Trust Deed and Offering Document that governs this transaction and further acknowledge having understood the risks involved. I/ We agree to abide by the terms and conditions therein.

NAME OF UNIT HOLDER(S) _____

SIGNATURE(S) _____

NOTE:

- In Case of Institutional Investor please affix Company stamp.
- Redemption of Units will only be possible where the authorization is in line with the instructions specified at the time of submission of Investor Account Opening Form.

DISTRIBUTOR / FACILITATOR INFORMATION

Distributor/ Facilitator Name		Distributor/ Facilitator Code		Redemption No.	
Total Certificate/ Units Received Certificates	Unit(s)	Name of Authorised Person at Distribution Center		Authorised Signature	

FOR REGISTRAR

Form Received On	Signature Verified By	Certificate Verified & Defaced By	Redemption Rate	Value	Zakat Deduction (if applicable)	Net Amount	Data Input By
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