

Reinvestment Application Form

AM2+ / AM2
Rated by VIS with
Stable outlook

Rated by PACRA with
Positive outlook



Day	Month	Year

Portfolio No.:

PRINCIPAL ACCOUNT HOLDER									
Name (as per CNIC) Mr./Mrs./Ms./Ms.									
Contact No.:									

REDEMPTION-REINVESTMENT DETAILS				
Name of Fund	Type	Redemption Amount in Rs.	Amount in Words	Reinvestment Amount in Rs. (Official Use Only)

NOTE:

- For Name and Type of Funds please refer to the next page.
- Applicable Zakat/CGT will be deducted from investor's account in addition to the redemption amount.
- Redemption proceeds will be Reinvested in the same type of account.
- Attach physical certificates (if issued) at the time of redemption.
- In case available amount in a fund is less than the amount requested in this form, the entire amount will be redeemed.
- In case of any change in authorized signatories of Corporate Investors, attach updated list of signatories.

DECLARATION AND SPECIMEN SIGNATURE OF ACCOUNT HOLDER(s)

I/We hereby confirm that all informations provided in this form are true and correct to the best of my knowledge. I also confirm having read and understood the Trust Deeds, Offering Documents, Supplemental Trust Deeds and Supplemental Offering Documents that govern the transaction further acknowledge understanding of the risks involved in mutual funds.

Signature of Principal/Joint Account Holder(s) (rubber stamp in case of Institutional Clients)

APPLICATION CHECKLIST (To be filled by Sales Representative)		
<input type="checkbox"/> Physical Unit Certificate	<input type="checkbox"/> List of Signatories	<input type="checkbox"/> Other
Form Received By		Signature and Stamp of Distributor
Reporting Date	Name and Signature of Reporting Agent	
Order Authorized by	Trade Authorized by	Signature and Stamp of Transfer Agent
REMARKS:		