

Al Ameen Islamic Children Savings Plan* - Transaction Form



CRM Lead

General Instructions

1. This form is for use by existing Unit Holders who want to make the following types of transactions in their investment account: 1) Purchase of Additional Units, 2) Redemption of Units, and 3) Conversion 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. If any alteration is made, a countersign is mandatory
3. Fill the form yourself or get it filled in your presence. Do not sign and/or submit blank forms
4. It is the responsibility of the Unit Holder to carefully read and understand the guidelines and instructions provided in this form and the terms and conditions, especially risk disclosure, disclaimer, warning statement, investment objective in the Offering Document(s) of the relevant Fund(s) and Supplemental Offering Document Plans(s) prior to submitting the form
5. In case this form is incomplete or not duly filled and there is any discrepancy, the entire form or the particular transaction(s) may not be processed
6. Applications complete in all respects and carrying necessary documentary attachments should be submitted at UBL Fund Managers' Investment Centers, designated UBL Branches, distributor outlets, or at UBL Fund Managers - Operations Office: 4th Floor, STSM Building, Beaumont Road, Civil Lines, Karachi, Pakistan. A complete list of Investment Centers, UBL Branches and distributor outlets is available on www.UBLFunds.com. To find an Investment Center near you SMS 'IC' to 8258
7. For assistance in filling this form or information about your current investment holdings call our nationwide help line at 0800-26336
8. The applicant is requested to sign on both pages of the form

1 Principal Unit Holder/Primary Guardian Details (Mandatory)

Customer ID

Principal Unit Holder's Name (Mr/Ms/Mrs/Messrs)
(Please write in block letters)

2 Joint Unit Holder/Secondary Guardian Details (If Applicable)

1. Name _____ 3. Name _____
2. Name _____ 4. Name _____

3 Transaction Type - Additional Purchase of Units

	Name of Plan	Amount (Rs.)
1	Al-Ameen Islamic Children Savings Plan	

Total Investment Amount (Rs) _____ In words _____

Total Investment Amount (Rs) _____ In words _____

	Mode of Payment	Instrument No.	(Drawn on) Bank Name	Branch Name & Code
1	<input type="checkbox"/> Cheque <input type="checkbox"/> Pay Order <input type="checkbox"/> Demand Draft <input type="checkbox"/> Online Transfer*			

Guidelines & Instructions

1. Cash will not be accepted. Payment can be made in the form of a cheque, demand draft, pay order or online account transfer
 2. Payment shall be made in favor of 'CDC Trustee UBL Funds' or 'CDC Trustee Al Ameen Funds'. Instrument should be crossed 'Account Payee Only'
 3. Front-end load (charges) will be applicable on investment as per the constitutive documents of the relevant fund(s)/plan(s)
 4. Transaction will be processed as per cut-off timings for the fund/plan. For cut-off timings SMS 'CT' to 8258
- * Online account transfer facility is available with selected banks. For a list of banks SMS 'OT' to 8258

Signature(s)

Date
(dd - mm - yy)

Principal Unit Holder(s)/
Primary guardian Signature

Joint Unit Holder(s) /
Secondary guardian Signature(s)

Note: In case of Joint Operating Instructions, signatures of both the Primary Unit Holder/ Guardian and Joint Holder(s) / Secondary Guardian(s) are mandatory

4

Transaction Type - Encashment/Redemption of Units

	Tick as appropriate	Name of Plan	Amount/Percentage of Redemption
1.		Al-Ameen Islamic Children Savings Plan	

Total Encashment Amount (Rs) _____ In words _____

I / We would like to receive the encashment amount in the form of: ☐ Cheque ☐ Demand Draft ☐ Pay Order ☐ Online Account Transfer*

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. Back-end load (charges) will be applicable on redemption as per the constitutive documents of the relevant fund(s)/plan(s)
3. Transaction will be processed as per cut-off timings of the fund/plan. For cut-off timings SMS 'CT' to 8258
4. Incase of encashment from an investment plan, units will be redeemed from the underlying fund(s) in accordance to the weightages assigned to them for that plan
5. Partial encashment from an investment plan will only be allowed subject to maintaining minimum investment amount in the plan
6. Incase of encashment from an investment plan, Takaful Coverage (if offered) may be withdrawn if minimum amount required for coverage in that plan is not met

* Online account transfer facility is available with selected banks. For a list of banks SMS 'OT' to 8258

5

Transaction Type - Conversion of Units

	From		To
	Name of Plan	Amount % of Investment	Name of Plan
1			

Total Conversion Amount (Rs) _____ In words _____

Note: This section does not apply to any investor converting to any plan(s) other than that of UBL Children Savings Plan (UCP)

6

Declaration & Signature(s)

I have read and understood the relevant Trust Deed(s) and Offering Document(s) of the respective Fund(s) and the Supplementary Offering Document of UBL Children Savings Plan and hereby apply for investment in the Plan. I have read, understood and agree to abide by all the rules, regulations, terms and conditions of these investments (thereof which shall be binding upon me as well as upon the Child, the Alternate Child (if any), Alternate Guardian (if any) and my legal heirs, legal representatives, executors, administrators and assignees as well as those of the Child and/or the Alternate Child), their allocations and any risks associated with them together with the guidelines given in this form. I have carefully read and completed all applicable sections of this Application Form prior to submission.

I 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) 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.

Date - -
(dd - mm - yy)

Principal Unit Holder'(s)/
Primary Guardian Signature

Joint Unit Holder'(s) /
Secondary Guardian Signature(s)

Note: In case of "Joint Operating Instructions" signatures of both the Principal Unit Holder/Primary Guardian and Joint Unit Holder/Alternate Guardian are mandatory.