## FIRST ICB UNIT FUND

Asset Manager: ICB Asset Management Company Limited

(A Subsidiary of ICB)

## **SURRENDER FORM**

(Delete words not applicable, Please write clearly)

	(To be filled in	by Issuing Office)	
То		Repurchase No.	
		Repurchase Date	
(Issuing Office Stamp)		Registration No./B.O. No.	
		Signature (s) Verified	
	To be filled in by the	ne Applicant (s)	Date
I/We			
of Being the Registered Holder(s) of			te of TKPer Unit of
FIRST ICB UNIT FUND by Certificate	e(s) umber(s)		
Registration No./B.O.No		Sale No	
			hereby declare that I/We
		elated Certificate(s	s) for repurchase on the price ruling
on the repurchase date for this surr		D	-4
			at Branch and
such Payment shall be accepted by			
out a,e on an object of a,	me, as as ran alsenarge m	. copeut or the our	
Witnesses:			
1. Signature			
Name			
Father's/ Spouse's Name		 1.	
Mother's Name			Signature of Principal Holder/
Occupation		Aut	horized Representative (In the case of Institution
Address			
2. Signature			
Name			
Father's/ Spouse's Name		2.	Signature of Joint Holder/
Mother's Name		Authori	zed Representative (In the case of Institution)
Occupation			

## NOTES:

- 1. The Repurchase Date in respect of any Surrender shall be all working days except **Thursday** and book closure period on which it is accepted and found to be in order by the Issuing Office, or if accepted on any other day the last working day of the week next following, if last working day of the week happens to be a holiday the repurchase will be done on the next working day.
- 2. Other Office will receive Surrender Forms for sending to the appropriate Issuing Office. Holders are advised that such repurchases may be delayed and they will be charged for any postage and other costs involved.
- 3. Payment will normally be made to the first named unit holder by "A/C Payee only" cheque. Payment required in any other form may involve the holder in further costs.
- 4. Application by Institution, Charitable Organization/Provident Fund/Trust Fund must be accompanied by the relevant document authorizing surrender in units such as Extract of Board Resolution, Letter of Authority issued in favour of Authorized person/signatory, A Power of Attorney in favour of the person signing the surrender Form, relevant document if Board Resolution is not required in favour of such surrender in units etc.
- 5. MAKE SURE ALL CERTIFICATES TO BE SURRENDERED ARE ATTACHED TO THIS FORM.

Received cheque/Pay order for TK		Cheque/pay order
10	Date	Bank
	Branch	on account of
epurchase value of	Units as on overleaf.	
	C:	<u> </u>
	Signature of Unit Holder(s)/	
Autho	orized Representative (Institution)	