ICB AMCL ISLAMIC UNIT FUND

IUF -GA

Asset Manager: ICB Asset Management Company Limited

(A Subsidiary of ICB)

SURRENDER FORM

(Delete words not applicable, Please write clearly)

	(To be fil	led in by Issuing Of	fice)	
То		Repurchase No.		
		Repurchase D	ate	
		Registration N	lo.IUF/	
(Issuing Office Stamp)		Signature(s) V	Signature(s) Verified	
	To be filled in by the	he Applicant(s)	Date	
I/We				
of				
Being the Registered Holder(S) of	ofUni	its at the rate of TK.	Per Unit of	
ICB AMCL ISLAMIC UNIT FUND	by Certificate(s) Numb	ber(S)		
TR	No		hereby declare that I/We	
			cate(s) for repurchase on the price ruling	
on the repurchase date for this si				
I/We desire payment in the form	n ofPay	yable to A/C No		
at		Bank	Branch and	
such Payment shall be accepted	by me/us as full disch	narge in respect of t	he said Units.	
Witnesses:				
1. Signature				
Name				
Father's/Husband's Name		1		
Mother's Name			Signature of Principal Holder/	
Occupation			Authorized Representative (In the case of Institution	
Address				
2. Signature				
Name				
Father's/Husband's Name			2. Signature of Joint Holder/	
Mother's Name		***************************************	Authorized 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
no	Date	Bank
	Branch	on account of
repurchase value of	Units as on overleaf.	
	Signature of Unit Holder(s)/	

Authorized Representative (Institution)