

Form	Name (Mr./ Mrs./ Ms./ M/s.)		Reg No.			
	<input type="checkbox"/> Information about the Principal Account Holder (Please use BLOCK LETTERS)					
Form	Name (Mr./ Mrs./ Ms./ M/s.)		ID No. (CNIC/ Passport)*			
	Address		Phone No. Off			
	City		Res.			
	Country		Fax			
	Occupation		Mobile			
	Nationality		E-mail			
	Religion		Status			
Zakat Deduction* <input type="checkbox"/> Yes <input type="checkbox"/> No		Declaration Attached <input type="checkbox"/> Yes <input type="checkbox"/> No		Specimen Signature		
<input type="checkbox"/> Joint Account Holder / Authorised Signatories		Operating Instruction: <input type="checkbox"/> Principal a/c Holder only <input type="checkbox"/> Anyone <input type="checkbox"/> Jointly by any two <input type="checkbox"/> Jointly by all (In case of institution, signature should be accompanied by rubber stamp)				
Form	Name (Mr./ Mrs./ Ms./ M/s.)		Specimen Signature			
	ID No. (CNIC/ Passport)*					
	Name (Mr./ Mrs./ Ms./ M/s.)		Specimen Signature			
Form	ID No. (CNIC/ Passport)*					
	Name (Mr./ Mrs./ Ms./ M/s.)		Specimen Signature			
	ID No. (CNIC/ Passport)*					
<input type="checkbox"/> Information about Nominee(s) (not applicable in case of joint account holder(s))						
Form	Name (Mr./ Mrs./ Ms./ M/s.)		ID No. (CNIC/ Passport)*			
	Relationship with principal a/c holder		Share (%)			
Form	Name (Mr./ Mrs./ Ms./ M/s.)		ID No. (CNIC/ Passport)*			
	Relationship with principal a/c holder		Share (%)			
<input type="checkbox"/> Bank Information (for redemption and dividend mandate)						
Form	Bank Account Number		Branch Address			
	Bank Account Title					
	Bank Name		Branch City			
<input type="checkbox"/> Other Information						
Dividend Mandate (Kindly intimate the mode of dividend distribution for all funds, incase of no decision, investor will automatically be issued bonus units in their respective a/c.)						
Name of Fund		KIOF	KSMF	KAAP	KIIOF	KCF
Bonus		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cash		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In case of bonus units, units will be added to investor's respective a/c which can be redeemed at the applicable price. In case of cash dividend, dividend warrants will be distributed to the investor's registered address.						
Account Statement Frequency		<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half yearly <input type="checkbox"/> Annually <input type="checkbox"/> Do not send statements				
Mode of receiving statements		<input type="checkbox"/> On my above e-mail <input type="checkbox"/> Courier/ Post				
<input type="checkbox"/> Transmission		I/ we the undersigned being the beneficiaries/ successors request you to register me/ us as Holder(s) of the Units as per details attached, now registered under above held Registration Number in the name of the above deceased/ insolvent. I/ we do hereby agree to accept and take the said Units subject to the same conditions on which they were herein before. I/we do hereby authorised you to recover the fees and charges by encashing the Units of the equivalent value.				
<input type="checkbox"/> Deletion		I/ we the undersigned being the holder(s) of the Units registered under above Registration Number do hereby inform that Mr./ Mrs./ Ms has expired on and request you to kindly delete his/ her name from the above Registration Number. I/ we do hereby authorize you to recover the fees and charges by encashing the Units of the equivalent value.				
Declaration		I/ we hereby acknowledge having read and understood the relevant Trust Deed(s), Offering Document(s) and guidelines (at the back of this Form) that govern this transaction and further acknowledge having understood the risks involved and I/ we agree to abide by the terms and conditions therein.				
Signature of applicant(s) (with Rubber Stamp in case of Institutional Client)						
For Official Use Only						
Distributor						
Form Received on Date/Time		Code	Remarks	Authorised Person's Name	Signature & Stamp	
Registrar						
Form Received on Date/Time		Form & Attachment Verified by	Data Input by	Data Verified by	Remarks	

*Please attach certified copies

Guidelines for filling out KASB Funds Limited Services Form – KFL 07

This form is common for all categories of investors. This form is designed to be used for any necessary changes in any information that he/ she has provided earlier. Make sure that you have read the relevant Trust Deed(s) and Offering Document(s) before filling this form.

- i) In case of an Application form being filled by the guardian, on behalf of a minor(s), the name of the minor(s) as well as of the guardian should be written clearly on the Form and the guardian's signature should be recorded in the specified section.

Details of Changes Requested

- ii) The Account Holder would need to specify with a 'tick' whether changes are sought in Principle Account Holder Information, Designated Bank Information, Joint Holder Information, Nominee Information or any other changes.

Transmission

- iii) In case of death or insolvency of the Principal Account Holder, all Joint Holders should specify so. A fresh **Registration Form KFL-01** would need to be filled including the following documents
- If the certificates are issued, the application shall be submitted along with the certificates issued.
 - Certified Copy of CNIC of the deceased Principal Account Holder and the Heir/ Successors.
 - Certified Copy of the Death Certificate.
 - Press clipping of Notice regarding transmission of Units published in any two leading Daily Newspaper.
 - Indemnity Bond on non-judicial stamp paper of appropriate value, duly executed by the Applicant with two suitable sureties (whose signature on the Bond of Indemnity may be verified by their Bankers, with bank stamp and Attorney Number of signatories)
 - Transmission Deed on the Non – Judicial stamp paper of appropriate value, duly attested by the notary public.
 - The Management Company/ Trustee/ Registrar will have the right to require production of Succession Certificate issued by a competent Court of Law.
 - The Management Company/ Trustee/ Registrar will have the right to require production of Heirship Certificate issued by the District Magistrate/ Commissioner.
 - In case of transferee not being a Joint Holder originally, all necessary documents required to be submitted with the **Registration Form KFL– 01** need to be attached.

Deletion of Name

- iv) In case of a death of a Joint Holder, all other holders need to specify so and identify the name of the deceased holder along with his/her date of expiry.
- v) The following would need to be attached for a request of deletion:
- Certified copy of Death Certificate of the deceased Unit holder
 - Certified copy of the CNIC of survivors(s)
 - Original Unit Certificate(s), if issued
 - In case of the death of Principal Account Holder, a fresh **Registration Form KFL- 01** is to be attached

Other information

- vi) In this section, the investor is given an option of receiving dividend in the form of cash or bonus. However, if investor does not mark, by default the dividend will be distributed in the form of bonus units which will be added to the respective investors' account. These units can be redeemed at the prevailing price.
- vii) In case of bonus units, units will be added to investors' respective account which can be redeemed at the applicable price. In case of cash dividend, dividend warrants will be distributed to the investor's registered address.
- viii) The Registrar will send directly to each Account Holder, an account statement upon every transaction in the account. However, account holders may indicate his or her desire to receive more frequent statements of account at additional charges.
- ix) Account Holder can opt to either receive Account Statement through courier/post or e-mail as per convenience.

Declaration

- x) For the purpose of operating joint accounts please make sure the joint holder(s) sign this Form as per the options selected in **Registration Form KFL-01**.
- xi) In case of institutions this section shall be used for authorised signatories and rubber stamp should be fixed for each signatory of the institution.
- xii) In case the Account Holder is illiterate and cannot sign, then he/ she must be required to submit a clear copy of CNIC with his/ her thumb impression on it and same would be affixed in the form as well. The form should be authenticated by his/ her banker.
- xiii) It is the responsibility of the applicant to pay all stamp duties, taxes and processing charges in relation to this transaction.
- xiv) The Registrar will send directly to each account holder, an account statement upon every transaction in the account.

For further information or any other queries you are requested to contact our representatives.

KASB FUNDS LIMITED.

11th Floor, Trade Centre,

I. I. Chundrigar Road,

Karachi-74200,

Pakistan

Tel: (92 21) 111-KFL-KFL, (111-535-535)

Fax: (92 21) 2639188

Email: funds@kasb.com

Web site: www.kasbfunds.com