

Date: \_\_\_\_\_

**1. DETAILS OF TRANSFEROR**

I/We, the undersigned being the registered holder(s) of Units, as detailed below request you to redeem my/our Units according to the provisions of the Trust Deed and the Offering Documents of the respective Atlas Fund(s).

Name of Transferor: \_\_\_\_\_ Folio No.: \_\_\_\_\_

Transfer in Units       Transfer in Amount       Transfer in Percentage (Only for Administrative Plan)

<p><b>Name of Fund</b></p> <p><input type="checkbox"/> Atlas Income Fund (AIF)</p> <p><input type="checkbox"/> Atlas Stock Market Fund (ASMF)</p> <p><input type="checkbox"/> Atlas Islamic Fund (AISF)</p> <p><input type="checkbox"/> Atlas Islamic Income Fund (AIIF)</p>	<p><b>Administrative Plans</b></p> <p><input type="checkbox"/> Growth Plan</p> <p><input type="checkbox"/> Balanced Plan</p> <p><input type="checkbox"/> Income Multiplier Plan</p> <p><input type="checkbox"/> Islamic Growth Plan</p> <p><input type="checkbox"/> Islamic Balanced Plan</p> <p><input type="checkbox"/> Islamic Income Multiplier Plan</p> <p><input type="checkbox"/> Systematic Payout Plan</p> <p><input type="checkbox"/> Systematic Withdrawal Plan</p>
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Certificate attached:  Yes       No.      If attached, please provide details of certificates.      Certificates Nos: \_\_\_\_\_

**Name(s) and signature(s) of the transferor(s)**  
 (All joint holders shall sign unless first named is authorized to sign singly)

	Name of Applicant(s)/ Signatory	Designation (In case of Institution)	Signature (with Rubber Stamp in case of Institution)
Principal Applicant/Signatory			
First Joint Holder/Signatory			
Second Joint Holder/Signatory			
Third Joint Holder/Signatory			

**2. DETAILS OF TRANSFEREE**

I am/We are Unit Holder(s). My/Our folio number is \_\_\_\_\_  I am /We are new applicant(s) (A separate account opening form is enclosed)

The above units may be registered in:  Existing Folio       New Folio

Name of Transferee: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_ Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Acceptance by Transferee:**

I/We hereby accept the holding of above mentioned units in my/our name subject to the same terms and conditions held by the transferor.

	Name of Applicant(s)/ Signatory	Designation (In case of Institution)	Signature (with Rubber Stamp in case of Institution)
Principal Applicant/Signatory			
First Joint Holder/Signatory			
Second Joint Holder/Signatory			
Third Joint Holder/Signatory			

**3. TRANSFEREE'S PROVISIONAL RECEIPT**

Received from Mr./Mrs./Ms./Messers (Transferor): \_\_\_\_\_ and Mr./Mrs./Ms./Messers (Transferee): \_\_\_\_\_

Application for the transfer of: \_\_\_\_\_ Number of Units: \_\_\_\_\_ Name of Fund: \_\_\_\_\_

Type of Unit: \_\_\_\_\_ Number of Certificates attached: \_\_\_\_\_ Certificate Nos: \_\_\_\_\_

Stamp & Receipt Date & Time: \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_ Authorized Branch: \_\_\_\_\_



Atlas Asset Management