

## **IDLC AML SHARIAH FUND**

Asset Manager: IDLC Asset Management Limited (IDLC AML)

## TRANSFER FORM

Managing Director

(Please read the "Terms and Conditions" on reverse carefully)

IDLC Asset Management Limited Symphony Tower (4th Floor), Plot No. SE (F) 09, Road No. 142, Gulshan Avenue, Dhaka – 1212	For Office Use only Transfer No.: Registration No.:			
Transferor (Please fill up the Form in BLOCK	LETTERS)			
I/We, address (if changed)				
	hereinafter referred to as transferor,			
am/are the holder(s) of Units of IDLC AML Shariah Fu words units) to				
Transferee  Name: Mr./Ms./Mrs Father/H  Mother: Occupation:				
Address				
National ID No. / Passport No. (if any):				
Email:Cor	· · · · ·			
Bank: Branch ETIN No				
Bank A/C No.:	Dividend Option: Cash CIP			
BO A/C No.				
Name of Institution:	Trust Other			
Bank: Branch:				
Bank A/C No.:	Dividend Option: Cash CIP			
BO A/C No.				
Means of transfer Inheritance Gift Society  SI. Name Designation  3  4	Signature Contact			
Mode of Operation: Jointly by	Singly by			
Document Enclosed:  ☐ Power of Attorney in Favor of Authorized Person(s) ☐ Society Registration Certificate  Witness  ☐ Extract of Board Resolution ☐ E-TIN Certificate ☐ Trust Deed	☐ Memorandum and Article of Association ☐ Certificate of Incorporation			
Signature: Name: Father's/Husband's Name:	Signature: Name: Father's/Husband's Name: Address: Signature of Transferor			
Signature of Transferor				



Cert	-	-	ceived a request for to	_			Units of IDLC AML Shariah Fund from
			Transfer No				
Issuing Officer's Seal, Signature & Date				Authorized Signature (Name & Designation)			
			Sig	gnature(s) and Phot	tograph:		
		Principal Appl	icant	Joint Applican	t	Nominee	
			/YY rified by Name:		·		
				TERMS & CONI	DITIONS		
1.			vay of inheritance/g agement Limited fro				ensfer, the fund will charge a nominal inheritance.
2.	Transfer of Units	is allowed throug	h the Se <b>ll</b> ing Agent	s and the Asset Mai	nager only.	, ,	
3.		_			- '	nd during the bo	ook closer period / record date of the
4.	The Confirmation	n of Unit A <b>ll</b> ocatio	on(s) of the transferc	or is/are required to	be attached with th	ne Transfer Form.	
5.	After verification Asset Manager w	of authenticity o	f the transferor's Co v Confirmation of U	nfirmation of Unit a	Allocation(s) as well e name of Transfere	l as the informati e within a period	on provided in the transfer Form, the of five working days.
6.	The conditions a	pplicable for initia	al Confirmation of U	Init Allocation will a	pp <b>l</b> y even after tran	nsfer of Units in th	ne name of Transferee.
				FOR OFFICE US	SE ONLY		Date: DD / MM / YY
	Transferee's Regist	ration No.:			Tran	nsfer No.:	Confirmation of
	Unit Allocation No	).:	No. of Units _		Certificate No.:_		
	Seal and Signature	e of Issuing Office	e				
	I/We, the said trans Confirmation of U						by agree to accept and take the said ansferor.
							Signature of Transferee  DD / MM / YY

## **IDLC Asset Management Limited**

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