

Date: _____

1. DETAILS OF TRANSFEROR

I/We the undersigned transferor(s) being the registered holder(s) of the under mentioned Units(s) of the respective Atlas Fund(s) transfer the said Unit(s) to the hereinafter named transferee(s) to hold subject to the same terms & conditions, on which I/We hold them.

Name of Transferor: _____ Folio No.: _____

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

Name of Fund	Administrative Plans
<input type="checkbox"/> Atlas Income Fund (AIF)	<input type="checkbox"/> Growth Plan <input type="checkbox"/> Balanced Plan <input type="checkbox"/> Income Multiplier Plan
<input type="checkbox"/> Atlas Stock Market Fund (ASMF)	
<input type="checkbox"/> Atlas Islamic Stock Fund (AISF)	<input type="checkbox"/> Islamic Growth Plan <input type="checkbox"/> Islamic Balanced Plan <input type="checkbox"/> Islamic Income Multiplier Plan
<input type="checkbox"/> Atlas Islamic Income Fund (AIIF)	<input type="checkbox"/> Systematic Payout Plan <input type="checkbox"/> Systematic Withdrawal Plan
<input type="checkbox"/> Atlas Money Market Fund (AMF)	<input type="checkbox"/> Profit Payout Units <input type="checkbox"/> Fixed Payout Units

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 a /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: _____ CNIC/NTN No.(Mandatory): _____

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 Received Date & Time

Authorized Signatory: _____] Authorized Branch: _____



Atlas Asset Management