REDEMPTION FORM (FOR ENCASHMENT OF UNITS) (FORM: AAML - 03)

Date: _____

Managed by:
Atlas Asset Management

1. ACCOUNT DETAILS

Name of Applicant: _____ Folio No.: _____

2. REDEMPTION DETAILS

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).

☐ Redemption in Units ☐ Redemption in Amount ☐ Redemption in Percentage (Only for Administrative Plan)

Name of Fund	Administrative Plans
☐ Atlas Income Fund (AIF)	☐ Atlas Bachat Growth Plan
	☐ Atlas Bachat Balanced Plan
☐ Atlas Stock Market Fund (ASMF)	☐ Atlas Bachat Plan
☐ Atlas Islamic Stock Fund (AISF)	☐ Atlas Bachat Growth Islamic Plan
	☐ Atlas Bachat Balanced Islamic Plan
☐ Atlas Islamic Income Fund (AIIF)	☐ Atlas Bachat Islamic Plan
☐ Atlas Money Market Fund (AMF)	
☐ Atlas Liquid Fund (ALF)	
☐ Atlas Islamic Money Market Fund (AIMF)	
☐ Atlas Sovereign Fund (ASF)	

Allocation Plans

☐ Atlas Aggressive Allocation Islamic Plan (AAAIP)

☐ Atlas Moderate Allocation Islamic Plan (AMAIP)

☐ Atlas Conservative Allocation Islamic Plan (ACAIP)

Certificate attached: ☐ Yes ☐ No. If attached, please provide details of certificates. Certificates Nos: _____

3. PAYMENT INSTRUCTIONS

☐ Please send the cheque for the redemption proceeds at my registered address

Registered Address (If different from registered address): _____

_____

☐ Please send directly to the Bank as per following particulars:

Account Title: _____ IBAN Number _____

Name of the Bank: _____ Branch Address: _____

☐ Foreign Remittance (Conditions Apply)

4. SIGNATURES

	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			

5. Customer Acknowledgement (for internal purpose)

I/We hereby confirm that acknowledgement receipt of my application has been received. Customer Signature _____

✂ -

6. ACKNOWLEDGED RECEIPT (Please make sure to take the receipt with you)

		Date	Authorized Branch:
Received from Mr./Mrs./Ms./Messrs:			(Stamp)
Name of Fund/Plan:			
Amount (Rs.):	In Words:		
Authorized Signatory:			