

COLLECTIVE INVESTMENT SCHEMES

SWITCH FORM

(To be completed by investors who wish to switch from one security to another within their Securities Investment Plan account)

IMPORTANT INFORMATION

1. Please send this form and all associated documents directly to the Administrator (by email only) to the following email address **admin@itransactfm.co.za**
2. Automated Outsourcing Services (Pty) Ltd is the Administrator of this product.
3. The responsibility of transmitting the documents to the Manager lies with the sender.
4. No form will be considered complete without all the required fields being completed and the required supporting documentation being submitted. The Manager reserves the right to reject any application and or instruction at any time due to incomplete or insufficient documentation and information.
5. **It is important that you have read and understood all the latest product media, terms and conditions associated to this product before you sign this form, all of which are available from the Manager whose details are provided at the end of this form.**

SECTION 1 INVESTOR DETAILS

Investor Number

First Name or Trading Name (If a legal entity)

Surname

If any of your contact details have changed since your initial investment, please provide updated details in the spaces below.

Cell Phone Number

Other Contact Number

Email Address

SECTION 2 SWITCH DETAILS

I/We hereby request the administrator to switch securities from my/our account as follows:

From (Collective Investment Scheme)	Rand Amount	Or Units	Or %	To (Collective Investment Scheme)	Switch Debit Order	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 3 INVESTOR DECLARATION

- 1. The latest terms and conditions associated to this product are applicable. The Investor is responsible for ensuring that he/she/it has read and understood them.
- 2. The Investor confirms that all statements made and information provided on this form are correct.

Signature of Investor or duly authorised person/s for minor investors Date (ddmmyy)

Print Initials and Surname

Signature of third party applicant or authorised representative of a legal body (if applicable) Date (ddmmyy)

Print Initials and Surname

SECTION 4 FINANCIAL SERVICES PROVIDER DECLARATION

- 1. The latest terms and conditions associated to this product are applicable. The Financial Service Provider is responsible for ensuring that he/she/it has read and understood them and explained them to the investor in full.
- 2. The Financial Service Provider confirms that all statements made and information provided on this form are correct.

Signature of Authorised Financial Service Provider/Representative Date (ddmmyy)

Print Initials and Surname

SECTION 5: FINANCIAL SERVICES PROVIDER DETAILS

Financial Service Provider Details

Name of Financial Services Provider (The Company)

Telephone

Facsimile

Email

Tick the box if the details below are the same as the FSP details above

Name of Financial Advisor/Representative

Telephone

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Cell

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Facsimile

Email

SECTION 6 MANAGER CONTACT DETAILS

Financial Advisor and Investor Support Centre

Telephone 086 111 6075 | Fax 011 561 6812 | Email admin@itransactfm.co.za

www.itransactfm.co.za