

UFS-PRAGATI LIFE UNIT FUND

Asset Manager: Universal Financial Solutions Limited (UFS)

TRANSFER FORM

(Please read Terms and Conditions on reverse carefully)

For Office Use only

Transfer No : _____

Registration No.: _____

To,
The Managing Director
Universal Financial Solutions Limited (UFS)

Registered Office : Level-8, 65/2/1, Box Culvert Road, Purana Paltan, Dhaka-1000, Phone: +88 02 9587880, +88 02 7122152, Fax: +88 02 9513934

Corporate Office : House # 87/A, Road # 26, Gulshan-1, Dhaka-1212, Phone : +88 02 9855269, 9855706.

(Please fill up the Form in Block Letters)

Transferor

I/We, _____ address (if changed) _____

hereinafter referred to as transferor, am/are the holder(s) of _____ Units of UFS-Pragati Life Unit Fund. I/We, would like to transfer _____ Units (in words _____ units) to

the following person/institution, hereinafter referred to as transferee:

Transferee

Name: Mr./Ms./Mrs. _____ Father/Husband: _____

Mother: _____ Occupation: _____ registration No. (For existing unit holder only): _____

Address: _____

Nationality: _____ National ID No./passport No. (if any): _____ Date of Birth: ____/____/____

Email: _____ Tel/Mob: _____ Bank: _____

Branch: _____ ETIN No.: _____

Bank A/C No. _____

Dividend Option Cash CIP

BO A/C No. _____

Means of Transfer: Inheritance Gift Operation of Law

If Transferee is Institution:

Registration no: (if existing unit holder): _____ No. of units held (if any): _____

Name of Institution: _____ ETIN No.: _____

Address: _____

Type of Institutions: Local Company Foreign Company Society Trust Other

Tel/Mob No.: _____ Fax No.: _____ Email: _____

Bank : _____ Branch: _____

Bank A/C No. _____

Dividend Option Cash CIP

BO A/C No. _____

Means of Transfer: Inheritance Gift Operation of Law

Details of Person (s), If any: _____

Sl	Name	Designation	Signature
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1.	_____	_____	_____
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2.	_____	_____	_____
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Mode of Operation: Jointly by _____ Singly by _____

Document Enclosed:

Memorandum and Article of Association Extract of Board Resolution Power of Attorney in Favor of Authorized Person (s)

ETIN Certificate Certificate of Incorporation Society Registration Certificate Trust Deed

Witness

1. Signature:

Name :

Father's/Husband's Name:

Address :

Applicant's Signature & Seal

2. Signature:

Name :

Father's/Husband's Name:

Address :

Signature of Transferor

Signature of Transferee

For Office Use Only

Checked and Verified by
Name :

Signature:

Date: DD / MM / YY

ACKNOWLEDGEMENT

Certified that this selling agent/ bank has received a request for transferring _____
Units of UFS-Pragati Life Unit Fund from _____ to _____

Issuing Officer's Seal & Signature and Date

Transfer No. _____

Authorized Signature
(Name & Designation)

TERMS & CONDITIONS

1. The Units may be transferred by way of inheritance/gift and /or by specific operation of the law. In case of transfer, the fund will charge a nominal fee as decided by Universal Financial Solutions Limited from time to time except in the case of transfer by way of inheritance.
2. Transfer of Units is allowed through the Asset Manager.
3. The Units will be transferred on all working days except the last working day of the week and during the book closer period/ record date of the Fund.
4. The total number of Units held by a single certificate is required to be transferred at a time.
5. The Confirmation of Unit Allocation(s) of the transferor is/are required to be attached with the Transfer Form.
6. The unit certificate(s), the unit holder(s) intend to transfer is/are required to be attached with the transfer form.
7. After verification of authenticity of the transferor's Confirmation of Unit Allocation as well as the information provided in the transfer Form, the Asset Manager will deliver the new Confirmation of Unit Allocation in the name of Transferee within a period of seven working days.
8. The conditions applicable for initial Confirmation of Unit Allocation will apply even after transfer of Units in the name of Transferee.

FOR OFFICE USE ONLY

Date: DD / MM / YY

Transferee's Registration No.: _____ Transfer No.: _____
Confirmation of Unit Allocation No.: _____ No. of Units _____ Certificate No.: _____

Seal and Signature of Issuing Officer

I/We, the said transferee, have received the above mentioned Confirmation of Unit Allocation and do hereby agree to accept and take the said Confirmation of Unit Allocation on the same terms and conditions on which they were held by the said transferor.

Applicant's Signature:

Signature of Transferee

Date: DD / MM / YY