



UNIT TRUST REDEMPTION FORM

How To Redeem

- 1. Please complete all relevant sections of this form, and send the required documents to Aeon Investment Management (Pty) Ltd via e-mail to funds@aeonim.co.za.
- 2. Cut off times for receiving transactions are 13:00 (SA).

DETAILS				
Client Number				
Investor				
Name / Entity Name	/ Co. Registered Name			
ID / Registered Numb	per			
Telephone (H)		Telephone (W)		
Cell		Fax		
E-mail Address				
ACTING ON BE	half Of Investor *			
	ns / persons with Powers of Att	orney		
Title	Surname			
First Name(s)		Male Female		
Date of Birth		Nationality		
ID or Passport Numl	per (if Foreign National)			
Street Address		Postal Address		
c/o		Same as Street Address Yes No		
Unit		c/o		
Complex		Line 1		
Street Number		Line 2		
Street		Line 3		
Suburb		Line 4		
City		Postal Code		
Postal Code		Country		





Country						
Telephone (H)			Fax			
Telephone (W)			Cell			
E-mail Address						
Capacity						
BANKING DETAILS OF I	NVESTOR					
Name of Account Holder Name of Bank						
Branch Name						
Branch Code						
Account Number						
Account Type						
7.000 din Typo						
Signature of Account Holder						
 If bank details have change statement that is no older that may be provided. The account holder must have no payments will be made the registered investor). No payments will be made 	han 3 months and ave a South Africar into third party bar	that clearly displays the bank account.	ne investor's name	and account	t number. Alternat	ively, a cancelled chequ
SPECIAL INSTRUCTIONS	3					
Unit Trust Funds						
Please select the appropriate for	und/s that you woul	ld like to redeem units	or a percentage of	units or a ra	nd value form.	
From Unit Trust Fund Name		Number of Units	Rand Value o	f Units	% of Units	Cancel Debit Order

From Unit Trust Fund Name	Number of Units	Rand Value of Units	% of Units	Cancel Debit Order	
				Yes	No
		R			
		R			
		R			
		R			





	R		
	11		

TERMS AND CONDITIONS

GENERAL

- 1. Please note that this application must be received by the Manager by or before 13:00 (SA).
- 2. Please note in the case of redemptions, settlement may take up to 48 hours. Funds invested via electronic collection or debit order may not be redeemed until after 40 days from the date on which such funds were invested into units on your behalf.
- 3. Investors wishing to redeem units amounting to more than 5% of the total market value of the relevant unit trust fund portfolio must provide the Manager with at least 7 business days' written notice of such redemption. If this notice is not received by the Manager, the company may treat such withdrawal as only having taken place on the 7th business date after such instruction is received. However, where the amount to be redeemed exceeds 10% of the total market value of the portfolio, the parties shall determine the actual date of withdrawal through mutual agreement between them.
- 4. The net asset value price is calculated using the forward pricing methodology. The net asset value can be defined as the total market value of all assets in the unit portfolio including any income accruals and less any permissible deductions from the portfolio, divided by the number of units in issue.

INSTRUCTIONS

- 1. Only signed written instructions (faxed copies included) from the unit holder or the FSP will be acted upon.
- 2. The Manager will not proceed with any transaction if there is any doubt as to the validity of any signatures/information or if it deems the instruction to be incomplete in any way and the company cannot be held liable for any resultant losses as a result thereof.

AUTHORISATION AND DECLARATION

- 1. I hereby give notice in terms of the trust deed of my application to sell the relevant units and in consideration of the purchase price to be paid to me for the said units, hereby cede, assign and transfer all my rights, title and interest in and the said units to you and acknowledge that I have no further interest therein.
- 2. I warrant that the information contained herein is true and correct and that where this application is signed in a representative capacity, I have the necessary authority to do so and that this transaction is within my power.
- 3. I know that there are no guarantees on my investment capital.
- 4. I authorise the Manager to accept and act upon instructions by facsimile or e-mail and hereby waive any claim that I have against the Manager and indemnify the Manager against any loss incurred as a result of the Manager receiving and acting on such communication or instruction.

Signed at	Date
Full name of Signatory	Capacity
Signature of Investor / Legal Guard	ian
2. Full name of Signatory	Capacity
Signature of Investor	

If signing on behalf of the investor please provide proof of authority and supporting verifying documentation.





CONTACT PRESCIENT MANAGEMENT COMPANY (RF) (PTY) LTD

Physical Address	Prescient House, Westlake Business Park, Otto Close, Westlake, 7945
Postal Address	P.O. Box 31142 Tokai 7966
Telephone	+27 21 700 3600
Fax	+27 21 700 5331
E-mail	pmancoadmin@prescient.co.za
Website	www.prescient.co.za

AEON INVESTMENT MANAGEMENT (PTY) LTD		
Physical Address	4th Floor, The Citadel 15 Cavendish Street Claremont Cape Town South Africa 7708	
Postal Address	P.O. Box 24020 Claremont Cape Town South Africa 7735	
Telephone	+27 21 204 6063	
E-mail	funds@aeonim.co.za	
Website	www.aeonim.co.za	