

Purchase of Unit(s) Form
For JS Islamic Capital Preservation Allocation Plan-6
Under Hybrid Fund of Funds-3 (JSIHFOF-3)

(No Cash Acceptable)
(نقد رقم وصول نہیں کی جاتی)

Date: - -

Section 1: Account Details

JSIL Account No.(For Existing Account Holders Only):

New Applicant

Account Title:

CNIC/ Passport No. (For individuals): NTN No.:

Contact Name (For Institutions):

Guardian's name (In case of Minor):

Section 2: Purchase Details

Table with 5 columns: Name of Plan under JSIHFOF-3, Plan Description & Allocation, Amount (In Figures), Amount (In Words), Front-End Load (% of NAV)

Section 3: Payment Mode / Instrument Details (Note: Make payment in favor of "CDC Trustee - JSIL FUNDS")

Table with 6 columns: Payment Mode, Date of Instrument, Instrument No., Bank Name, Branch Name, Amount (In Figures)

Section 4: Disclosure of Cooling-off Right

The unit holders have the right to obtain a refund of their first time investment (cooling-off right) in a particular Collective Investment Scheme. The cooling-off right shall only be available to the individual unit holders.

Section 5: Declaration (for All Applicants)

I/We hereby acknowledge that I/We have fully understood all the reference notes; and the provisions of the Trust Deed and offering Document including the risk disclosures and warnings. I/We hereby acknowledge all the Terms and Conditions along with details of Sales Load to be deducted and Cooling-off Period Right have been read and understood.

میں/ ہم تسلیم کرتے ہیں کہ میں/ ہم نے تمام حوالہ جات، اور معاہدہ کی دفعات اور منصف خطرات اور انتباہ سمیت پیش کردہ دستاویزات کو مکمل طور پر سمجھا لیا ہے۔ میں/ ہم نے تمام شرائط و ضوابط معاہدہ سے کوئی بھی تعلق اور کوئی بھی مالی پابندی نہیں ہے۔ میں/ ہم پاکستان سے ڈیوٹیڈ بینڈ یا میرے ہمارے اکاؤنٹ میں رجسٹرڈ پیش کی فروخت سے حاصل ہونے والی آمدنی کی واپسی کا مطالبہ نہیں کریں گے۔

Principal / Authorized Signature Joint / Authorized Signature Authorized Signature Authorized Signature

Note: In case of Minor / Guardian / Shaky signature / Thumb Impression, please submit a clear copy of CNIC and "B-form" (only in case of Minor). In such cases, two witnesses are required to sign the form.

Witness (1) Name: Signature: CNIC/ Passport No.:
Witness (2) Name: Signature: CNIC/ Passport No.:

Reference Notes
If any field is not applicable kindly write N/A. The form must be signed by the persons as per the list of authorized signatories (along with a company stamp in case of institutional customers).

For Official Use
Channel Partner: Region / City: Branch Name / Code:
Relationship Manager: Comments:

Proof of Application for Purchase of Unit(s) - (Investor's Copy)
Transaction for: New Applicant Existing Account Holder | JSIL Account No:
Account Title:
Purchase Details: 1. Plan Name: JS Islamic Capital Preservation Allocation Plan-6
Amount:
Channel Partner: Relationship Manager:
Receiving Stamp & Signature: JS investments
Managing Mutual Funds Better!
www.jsil.com | 111-222-626