	ICB F vestmer	-UN[hts for	DS Life														
Please ensure that your applic SMS upon receipt of the applic پیل اور ایس ایم ایس مطلع کریں گے۔	ation form/c	cheque is co	ompletely fill														
PAKISTAN PEN ALHAMRA ISLA	SION	FUND]]					REDI					EST	FO	
Date:											Please	e write i	n block	letter	s using	black	ink
				Section 1 -	Particip	ant's Detai	ils										
(Full Name in Block Letters)																	
Title	Mr.	Mrs.	Ms.	Ms. Registration Number													
Participant's Name			· · · · · · · · · · · · · · · · · · ·							NTN No.							
Distinctive Account Number						-							-		-	0	1
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			Sect	tion 2 - Early	Redem	otion Infor	mation										
Withdraw / Redeem (Rs.)	Section 2 - Early Redemption Information Pak Rupees (in words)																
						ils of Tax											
Copy of the Last Three Years' Assessment Order for Tax Rate Calculation (Attached)											Yes			No			
Total Tax Paid or Payable for Three Preceding Tax Years										Rs	Rs.						
Total Taxable Income for Three Preceding Tax Years										Rs	Rs.						
										_		Partic	pant's Si	ignatur	e		
Section 4 - For Official Use Only													punt 5 51	gilatur			
				Section 4 - I	For Offic	iai Use Oni	У										
Distributor's Information																	
Distributor's Name	oistributor's Co	ibutor's Code Transaction					ode		_	Transaction Date							
Name of the Authorised Person at Distribution Centre												Authorised Signatory					
For Registrar Use Only																	
Request Form Received	Request Form Received On				Data Verified By							Data I	nput By				
Remarks																	

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