



# WITHDRAWAL INSTRUCTION INDIVIDUALS / ENTITY

Boutique Collective Investments (RF) (Pty) Ltd administers the BCI unit trusts. It is authorised to do so as a Manager, in terms of the Collective Investment Schemes Control Act. In this document it will be referred to as "BCI"

#### **IMPORTANT INFORMATION**

- 1. This form is to be used by existing investors only
- 2. Please read the Terms and Conditions that apply to this investment. This is available from your financial adviser, the Client Service Centre or at <a href="https://www.bcis.co.za">www.bcis.co.za</a>
- 3. Please fax the completed form to our Client Service Centre (011) 263 6152, or email instructions@bci-transact.co.za
- 4. Please note; the cut-off for instructions is 14:00, Money Market cut-off is 11:30. If received after the cut-off the next business day pricing will apply.

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SECTION 1: INVESTOR D	DET	AILS																							
BCI Investor Number / Client	Acc	ount Nu	ımber																						
Title																									
Surname / Entity Name (e.g	com	pany or	trust)																						
Name of Investor / authorise	ed co	ntact p	erson																						
ID or passport number / Registration number																									
Telephone (H)							(W)																		
Fax															ı	Mobile									
Email																									
SECTION 2: WITHDRAW	/AL	DETAI	LS																						
Do you want to withdraw all Please note there is a 40 day If No, please complete the se	clea	arance p	eriod						pay		Yes nce		ared	and	No accou	ınt is o	closed		Clos	e acc	oun	t?		\	'es
Portfolio Name RCI BCI Flexible Fund RCI BCI Worldwide Flexible F					Class	R R	Onc	e -off [	Disinv	estme	ent		Uni	ts		R R	nthly	Wit	hdra	wal		-	or _		% %
TOTAL INVESTMENT AMOU						R	느	1		_						R			—						
Do you want to cancel the m	ebit	•	drawa	l?				Yes Yes		-	No No														
Regular Withdrawal Paymer	nts																								
The cut-off for instructions is	3 14:	00, Mor	ney M	arket (	cut-of	ff is 1	1:30	). If rece	eived	after	the	cut	-off	the	next b	usine	ss day	pri	cing	will a	pply				
Payment Frequency		Month	nly				Qua	arterly					Bia	nnu	ally			Anı	nuall	У					
Redemtion Date		1st					15t	h					25t	th	Sta	rt date	D	D	M	M	Υ	Υ	Υ	Y	
Participatory interests will be and in line with the terms an				•				_																	
SECTION 3: INVESTOR E	BAN	K ACC	OUN <sup>®</sup>	T DET	TAILS	S (A	ссои	ınt to	be u	sed j	for	wit	thdi	raw	al po	yme	nt ins	strı	ıctic	ons)					
Please keep BCI informed of	any	changes	s in yo	ur bar	nking	deta	ils.																		
Account Holder																									
Bank																									
Branch Name														Bra	nch co	de									
Account Number		Щ				L	$\square$				_[														
Account Type		Curren	t				Savi	ngs					Trai	nsm	ission										

All payments are made electronically to the current, transmission or savings bank account of the registered investor only. No payments will be made to

credit card or market-linked accounts. No Third Party bank accounts are permitted.

## SECTION 4: INVESTOR DECLARATION

- ⅓ I/We confirm that all information provided herein is true and correct and that I have read and understood the contents of this form.
- + I/We have read, understood and agree to the Terms and Conditions.

Signature of investor(s) / legal guardian  Date D / M M	/ [	Υ	Υ	Υ	Υ
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## CONTACT DETAILS

--- Physical Address

Boutique Collective Investments Catnia Building Bella Rosa Village Bella Rosa Street Bellville 7530

\_!\_ Custodian / Trustee

The Standard Bank of South Africa Limited

Tel: +27 (0)21 441 4100

#### Contact us

Tel: +27 (0)21 007 1500/1/2 | +27 (0)21 914 1880 | Fax: +27 (0)86 502 5319 Email: clientservices@bcis.co.za | Visit our website: **www.bcis.co.za** 

Should you have any complaints, please send an email to  $\underline{complaints@bcis.co.za}$ 

ASISE AN ORDINARY MEMBER OF THE ASSOCIATION FOR SAVINGS & INVESTMENT SA