

## HEDGE FUND TRANSFER

### INDIVIDUALS / LEGAL ENTITIES

Fundrock Collective Investments (RF) (Pty) Ltd ("FR") is part of the Apex Group Ltd. FR is a registered Manager of the FR Retail Hedge Fund Scheme and the FR QI Hedge Fund Scheme, both approved in terms of the Collective Investments Schemes Control Act, No 45 of 2002.

#### IMPORTANT INFORMATION

1. This form is to be used by existing investors only.
2. Please read the **Investor Terms and Conditions of Engagement** that apply to this investment. This is available from your financial advisor, the Client Service Centre or at [www.fundrock.com/fundrock-south-africa](http://www.fundrock.com/fundrock-south-africa).
3. Please email required documents for processing to [hedge-instructions@fundrock.com](mailto:hedge-instructions@fundrock.com).
4. **Monthly Liquidity Portfolios:** The cut-off time for an instruction submission is 10h00 on the last business day of the month, to enable processing for the first business day of the following month.  
**Daily Liquidity Portfolios:** The cut-off time for submitting an instruction is 14h00 on any business day for all investment options. Instructions received after the cut-off time will be processed on the following business day.

#### SECTION 1: CURRENT INVESTOR DETAILS

|                                               |                             |                           |
|-----------------------------------------------|-----------------------------|---------------------------|
| FR Investor Number / Client Account Number    | <input type="text"/>        |                           |
| Title                                         | <input type="text"/>        |                           |
| Surname / Entity Name (e.g. company or trust) | <input type="text"/>        |                           |
| Name of Investor / Authorised contact person  | <input type="text"/>        |                           |
| ID or Passport number / Registration number   | <input type="text"/>        |                           |
| Telephone numbers                             | Home <input type="text"/>   | Work <input type="text"/> |
|                                               | Mobile <input type="text"/> |                           |
| Email address                                 | <input type="text"/>        |                           |

#### SECTION 2: INVESTMENT TRANSFER DETAILS

Would you like **all** your units to be transferred: Yes ☐ No ☐

If No, please indicate how your unit trust portfolio/s should be transferred in the table below:

| Unit Trust Portfolio | Account Number | Total amounts |    | Units |    | Percentage                                                                            |
|----------------------|----------------|---------------|----|-------|----|---------------------------------------------------------------------------------------|
|                      |                |               | or |       | or | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> % |
|                      |                |               | or |       | or | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> % |
|                      |                |               | or |       | or | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> % |
|                      |                |               | or |       | or | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> % |
|                      |                |               | or |       | or | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> % |
| TOTAL                |                |               |    |       |    | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> % |

The transfer of participatory interests is automatically classified as a Capital Gains Tax event. If you are transferring ownership to your spouse, you may choose to have the event rolled over to the transferee. Please note that the spouse must be a resident in terms of South African Tax Law. If "yes" is selected, please supply a copy of your marriage certificate.

Roll over CGT event for this transfer: Yes ☐ No ☐

|                         |                      |      |                                                                                                                                                                             |
|-------------------------|----------------------|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Signature of transferor | <input type="text"/> | Date | <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Name of signatory       | <input type="text"/> |      |                                                                                                                                                                             |

#### SECTION 3: INVESTOR DETAILS TRANSFERRING TO

If transferee is not an existing unit trust account holder, please complete an application form and forward to us with all your FICA documentation.

|                                               |                             |                                                                                     |
|-----------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------|
| FR Investor Number / Client Account Number    | <input type="text"/>        |                                                                                     |
| Title                                         | <input type="text"/>        |                                                                                     |
| Surname / Entity Name (e.g. company or trust) | <input type="text"/>        |                                                                                     |
| Name of Investor / Authorised contact person  | <input type="text"/>        |                                                                                     |
| ID or Passport number / Registration number   | <input type="text"/>        |                                                                                     |
| Telephone numbers                             | Home <input type="text"/>   | Work <input type="text"/>                                                           |
|                                               | Mobile <input type="text"/> |                                                                                     |
| Email address                                 | <input type="text"/>        |                                                                                     |
| Residential / Physical / Registered address   | <input type="text"/>        |                                                                                     |
|                                               | Postal Code                 | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

Signature of transferee

Date

 /  / 

Name of signatory

## SECTION 4: BANKING DETAILS

### Distribution Payments

☐ Distributions to be re-invested OR ☐ Distributions paid into account as per the 'Investor bank account details below'

Account holder

Bank

Branch name

Branch code

Account number

Account type

☐ Current☐ Savings☐ Transmission

### Debit Order Details

Total to be collected R  commencing on the last day of

 / 

**Debit order shall be debited from my account on the last day of the month.**

Should the last day of the month, however, fall on a weekend or RSA public holiday, the debit order will be debited on the last business day of the month. The cut-off for all debit order notices to be processed in a particular month is by 14:00, **three business days** before the selected day.

## SECTION 5: INVESTOR DECLARATION

- I confirm that all information provided in this form and all other documents signed by me in connection with this application, whether in my handwriting or not, are true and correct.
- Where this form is signed in a representative capacity I confirm that I have the necessary authority to do so.
- I confirm that FR may accept instructions from any authorised third-party who has been authorised by me in writing.
- I have read, understood and agree to the latest **Investor Terms and Conditions of Engagement** on the FR website [www.fundrock.com/fundrock-south-africa](http://www.fundrock.com/fundrock-south-africa).
- Where signed in the capacity as legal guardian, I explicitly consent to the use of the minor's personal details contained herein.
- FR will accept electronic signatures accompanied by a certificate or audit trail.
- I hereby indemnify and hold FR, its affiliates, directors, officers, employees, and agents harmless from and against any and all claims, losses, liabilities, damages, costs, and expenses (including reasonable legal fees) arising from or in connection with the use of electronic signatures, including any fraud, misrepresentation, or unauthorised use by any person.

### PRIVACY STATEMENT

Fundrock Collective Investments (RF) (Pty) Ltd ("FR") takes your privacy and the protection of your personal information seriously, and we will only use your personal information in accordance with Applicable Laws and the FR Privacy Policy. It is important to us that you understand how we obtain, process, store, and share your information. We may disclose your information to other entities in the Apex Group and/or its subsidiaries, agents, partners, or sub-contractors, for purposes as described in this application or related privacy policies. By submitting any personal information to FR you provide us with your consent to, alternatively acknowledge, the processing and sharing of your personal information and/or that personal information which you have provided that relates to other data subjects, as set out in the Privacy Policy. Please do not submit any personal information to FR if you do not agree/ object to any of the provisions of the Privacy Policy. Should you object to the Privacy Policy, or parts thereof, FR may not be able to provide its products and/or services to you. To access the FR Privacy Policy please click on the [link](#) or on the FR website [www.fundrock.com/fundrock-south-africa](http://www.fundrock.com/fundrock-south-africa).

Signature of investor(s) or legal guardian

Date

 /  / 

Name of signatory

### POPIA

By signing this application, I consent, alternatively acknowledge, that I have read and understood the Privacy Policy and I consent, alternatively acknowledge, to the collection, processing, storage, and internal sharing of my personal information by FR and members of the Apex Group, in accordance with the Protection of Personal Information Act, 4 of 2013 (POPIA).

## CONTACT DETAILS

### Physical Address

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

### Contact us

Tel: +27 21 007 1500/1/2 or +27 21 879 9937/9  
Email: [sa-hedgesupport@fundrock.com](mailto:sa-hedgesupport@fundrock.com) | [sa-compliance@fundrock.com](mailto:sa-compliance@fundrock.com)  
Visit our website: [www.fundrock.com/fundrock-south-africa](http://www.fundrock.com/fundrock-south-africa)

*Should you have any complaints, please send an email to [sa-complaints@fundrock.com](mailto:sa-complaints@fundrock.com)*



AN ORDINARY MEMBER OF THE ASSOCIATION FOR SAVINGS & INVESTMENT SA

### Custodian / Trustee

FirstRand Bank Limited (acting through its RMB Custody and Trustee Services Division)  
Tel: +27 87 736 1732