

SatrixNow Switch Form



- Manual clients incur an additional fee (over and above the platform fee) of 0.05%.
- Please note that you will only be able to switch back to online transacting 6 months after your last conversion.
- All distributions are automatically reinvested, net of costs.
- Please note, when you request a 100% switch out or 100% sell from a fund, any distributions due to you from that fund will be paid to your bank account.
- Statements will only be available quarterly, you may contact the client services centre to obtain your latest balance
- The turnaround time for your instruction will be 7 business days from receiving all necessary and completed documentation. Instructions received on public holidays and weekends or after 13:00 on a business day will be deemed to have been received on the following business day.



- View the full list of funds and the Minimum Disclosure Documents (MDD's) with applicable fund minimums and fees, refer to www.satrix.co.za
- The terms and conditions are available on the web (Terms and Conditions)
- If you cannot access the link provided above, this can be obtained from our Client Services Centre or directly from our website www.satrixnow.co.za
- Initial any changes you make on the form.
- The registered investor or authorised signatory must date and sign the form.



Our Contact Details

Please send the completed form and supporting documents to:

E-mail: <u>instructions@satrixnow.co.za</u>
Postal: PO Box 411449, Craighall 2024

Enquiries

Tel 010 020 2250

E-mail: Helpme@satrixnow.co.za

Website <u>www.satrix.co.za</u>



Turnaround Time

24 business hours after receipt of all required information

All required documents must be provided before we can process your instruction.



SatrixNow Switch Form

| 1. Investor identity into | | | | | |
|--|-----------------------------|------------------|---------------|---------------|------|
| | | | | | |
| Title First name(s | s) / Legal Entity N | ame | | | |
| Last name | | | | | |
| Date of birth | (ddmmccyy) | Country of birth | | | |
| South African identification num | ber | | | | |
| OR | | | | | |
| Passport (if foreign national): | Number _ | | | | |
| | Expiry date _ | | (ddmmccyy) | | |
| | Country _ | | | | |
| OR | | | | | |
| US Citizens social security num | ber | | | | |
| Email address | | | | | |
| Residential address | | | | | |
| | | | | Postal code _ | |
| Country | | | | | |
| Postal address Only complete if different from residential address | | | | | |
| | | | | Postal code | |
| Country | | | | | |
| Contact numbers | International dialling code | Area code | | Number | |
| Telephone (work) | | | | | |
| Telephone (home) | | | | | |
| Cell/Mobile | | n.a. | | | |
| Occupation | | | Self Employed | Yes | No 🗌 |
| | | | | | |

Initial ____

2. Switch Details

(View our Minimum Disclosure Documents (MDDs) on our website www.satrixnow.co.za

Switch from: Indicate the fund you would like to switch from and the amount you want to switch from each fund

| FROM Fund | Rand Value, Units Or % | TO Fund | Rand Value, Units, Or % | | | |
|---|---------------------------|---------------------------|---|--|--|--|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| Switch all future debit order contributions: Yes □ No □ | | | | | | |
| If you have switched the total investment value of a fund, we will pay out distributions accrued to your bank account. 9. Investor declaration | | | | | | |
| I / We confirm that I / we: have read and understood the important notes, on the first page as well as the terms and conditions. have the authority and am / are legally competent to enter into and conclude this transaction, with the necessary legal assistance when it is required. are aware that the legal guardian must sign the instruction on behalf of a minor (if applicable). | | | | | | |
| Signature of investor | | Date | (ddmmccyy) | | | |
| Authorised signatory* | | Date | (ddmmccyy) | | | |
| Authorised signatory* | | Date | (ddmmccyy) | | | |
| *Authorised signatories acting on behalf of the inveinvestor). | stor (e.g. parents / gu | uardians of a minor and p | ersons authorised to act on behalf of the | | | |

Initial _____