

NBP FULLERTON ASSET MANAGEMENT LIMITED

SELF CONTRIBUTION FORM

Form: NAFA VPF-03



NBP Fullerton
Asset Management Ltd.
A Subsidiary of
National Bank of Pakistan

Date: _____

Customer ID									-											-		
NAFA Account No.																						

1. ACCOUNT DETAILS (FILL IN BLOCK LETTERS)

Principal Account Holder's Name _____

2. INVESTMENT DETAILS

Please select any one: <input type="checkbox"/> NAFA Pension Fund <input type="checkbox"/> NAFA Islamic Pension Fund	Please select any one: <input type="checkbox"/> Fresh Contribution <input type="checkbox"/> Transfer of Contribution from another Pension Fund Pension Fund Name _____ Name of Pension Fund Manager _____ <input type="checkbox"/> Transfer from Provident Fund Provident Fund Name _____
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3. PAYMENT DETAILS

Investment details for 'Fresh contribution / From Provident Fund'

Contribution Amount (Rs.) _____ In words _____

Mode of Payment: Cheque Pay Order Demand Draft

Cheque / Pay Order / Demand Draft No. _____ drawn on (Bank & Branch) _____

Cheque / Pay Order / Demand Draft No. _____ drawn on (Bank & Branch) _____

Investment details for 'Transfer of contribution from another Pension fund'

Contribution Amount (Rs.) _____ In words _____

Out of which (Rs.) _____ (Original Contribution (Rs.) _____) Pertaining to Provident Fund.

Mode of Payment: Cheque Pay Order Demand Draft

Cheque / Pay Order / Demand Draft No. _____ drawn on (Bank & Branch) _____

Cheque / Pay Order / Demand Draft No. _____ drawn on (Bank & Branch) _____

4. DECLARATION & SIGNATURE

- I will not claim Repatriation from Pakistan of Redemption proceeds of the Units excepts as permissible under the rules of State Bank of Pakistan or Ministry of Finance, Government of Pakistan
- I / We have read and understood the Trust Deeds, Offering Documents of the respective Fund and the risks involved, together with the guidelines at the back of the form including maximum rate of sales load charge to me / us.
- I / We hereby declare that I/We have read, understood and completed Risk / Return Profiling Questionnaire or completed the online Risk Profiling Questionnaire on NAFA website.
- I understand that if Investment form is received by NAFA and or Distributor / Facilitator after the cut off time, that transaction will be processed on the next working day and that I would not hold NAFA responsible for any loss consequent to such processing of investment form on the next working day.

I have carefully read, understood and accept the terms and conditions given in the Trust Deeds and Offering Documents of respective Fund. I understand that the company may amend or alter the terms and conditions referred herein and hereafter, from time to time. I have understood that investment in Pension Funds are subject to market risks and fund prices may go up or down based on the market conditions. I have understood that past performance is not necessarily an indicator of future results and there is no fixed or guaranteed return. I understand that my withdrawals made from the respective Funds, prior to retirement will result in a withholding tax as per income Tax Ordinance 2001. I have no objection to the Prescribed Investment Policy and Prescribed Allocation Policy determined by the Commission and the Pension Fund Manager and I am fully aware of the risks associated with the prescribed Allocation Scheme.

Date : _____ Participant's Signature: _____

5. FOR OFFICE USE ONLY

Approached by	Client ID	Distributor/Facilitator Name/ Code	Signature of Distributor/Facilitator	Date & Time	Form Received on (Date & Time)	Particulars Verified By Name & Signatures	Data Input By
<input type="checkbox"/>	<input type="checkbox"/>						
NAFA Sales Staff	Self						

6. NBP Sales Referred By

Name	CNIC No:	NBP Employee card No.	NBP Branch address & Code



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FUND NAMES, CODE & SALES LOAD

Fund Name	Fund Code	Sales Load (%)*	Fund Name	Fund Code	Sales Load (%)*
NAFA Pension Fund	NPF	3%	NAFA Islamic Pension Fund	NIPF	3%

General Instructions

1. This form is for use by participants who want to make contribution in their Pension Fund account with NAFA.
2. Fill the form in block letters and in legible handwriting to avoid errors in application processing. If any alteration is made, a countersign is mandatory.
3. Fill the form yourself or get it filled in your presence. Do not sign and/or submit blank forms.
4. Please tick in the appropriate box wherever applicable, incase any field is not relevant, please mark 'N/A' (Not Applicable).
5. It is the responsibility of the applicant to carefully read and understand the guidelines and instructions provided in this form and the terms and conditions, especially risk disclosure, disclaimer, warning statement, investment objective in the Offering Document of particular Fund(s).
6. If acknowledgement of the investment is not received within 7 working days, the investor should contact nearest NAFA branch or call our Toll-Free helpline at 0800-20001.
7. Applications incomplete in any respect and/or not accompanied by required documents are liable to be held or rejected until complete requirements are fulfilled.

Payment Instruction / Guidelines

1. Payment can be made in the form of cheque, demand draft, pay order or online account transfer, Cash will not be accepted.
2. Payment shall be made in favor of 'CDC Trustee (NAFA Pension Fund) or 'CDC Trustee (NAFA Islamic Pension Fund) and crossed "Account Payee" only.
3. Minimum contribution amount as per details provided in the Offering Document of the Fund is Rs. 10,000 for new account and Rs. 1,000 for an existing Account.
4. If payment instrument is returned, the unpaid application will be rejected.
5. Front-end fee (sales load) shall be applied to all contributions to individual pension accounts as per the Offering Document of the Fund. However no Front-end Load shall be charged to such participants who transfer their individual pension accounts, partially or wholly, from another pension fund or transfer from pension policies approved by the Commission and issued by Life Insurance Companies before June 30, 2005.
6. Application will be processed as per cut-off timings for the Fund.