

## TRANSFER AUTHORIZATION FORM

		Name Signature
		FOR OFFICIAL USE ONLY
SIGNATURE&DATE	:	
I am hereby authoriz	ing IEI A	Anchor Pension Manager Limited to transfer my contributions to <b>Fund II</b>
		Signature & Date
I C	ontirm	that I have read and understood the features of Fund II.
these investments fluctu (mutual funds), Real Esto	ate daily ate Inves	e investments whose returns cannot be pre-determined from inception. The prices y. Instruments in this category include Ordinary shares, open and closed ended fun stment Trusts (REITs), infrastructure funds and private equity funds.
FUND II		55% 10%
FUND		MAXIMUM EXPOSURE MINIMUM EXPOSURE
		s of Fund II, do read through and after doing so, do indicate your sof the fund by appending your signature below.  EXPOSURE TO VARIABLE INCOME INSTRUMENTS
EMAIL	:	
TELEPHONE NUMBER	:	
CONTACT ADDRESS	:	
OTHER NAMES	:	
SURNAME	:	
TITLE	:	
FIIV	:	
DIN		
Please do fill this form PIN	to enal	able us transfer your contributions to Fund II (if so desired):