

1 MY PERSONAL DETAILS

Amundi TC account number* :

Last name* :

Company name / code :

First name* :

Email :

Mobile phone : +.....

**The application will be considered incomplete if this data is not provided*

2 MY REDEMPTION REQUEST

In case of an early redemption, please contact your HR correspondent who is entitled to validate your request ** :

Section 4

I require the redemption of my assets:

- ☐ Available and/or,
- ☐ Available within the next three months and/or,
- ☐ Unavailable, using the following early redemption motive : |_|_|_|

Motive date: |_|_|_| |_|_|_| |_|_|_|_|_|
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Investment vehicle	Investment fund	Total redemption	OR partial redemption (number of units to redeem or amount in €)	Threshold (minimum unit value)*** (optional)
		<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
		<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

***only on authorized funds. Please contact your HR to know if your assets are eligible.

3 MANDATORY DOCUMENTS TO ATTACH TO THIS FORM

- ☐ I **imperatively** enclose **a copy of my personal ID** (valid Passport, ID card or driving license)
- ☐ I **imperatively enclose a bank document**, in my name, showing the BIC code of the bank and my IBAN number (EU), SWIFT code and complete bank account (outside EU)

4 COMPANY VALIDATION (HR Correspondent) (only for early redemptions)

Date :

Company stamp :

Correspondent's name :

Correspondent's signature :

5 MY VALIDATION (mandatory)

Date

My signature * :



PLEASE SEND COMPLETE FILE TO:

E-mail : soprasteria.international@amundi-tc.com

Fax : 00 33 4 75 74 32 23

Address : Amundi TC International Team ,
TSA 40201, 26956 VALENCE CEDEX –
France

Any incomplete application will lead to an additional processing delay