





Cession Notification Form

Collective Investments (Unit Trust)

CLIENT DETAILS																						
ENTITY ACCOUNT NUMBER																						
NAME & SURNAME / ENTITY NAME																						
IDENTITY / PASSPORT / REGISTRATION NUMBER																						
CESSION DETAILS																						
CESSION TYPE		IN S	SECU	RITY																		
I/We wish to cede:																						
UNITS TO THE VALUE OF	R																					
NUMBER OF UNITS																						
ALL UNITS																						
Only collateral cessions are allowed	d for	trans	sfer o	of ow	ners	ship,	plea	se re	efer t	o the	trar	nsfer	requ	uiren	ents	S.						
CESSIONARY'S DETAILS																						
TITLE																						
FIRST NAME (IF INDIVIDUAL)																						
SURNAME/NAME OF LEGAL ENTITY																						
IDENTITY/REGISTRATION NUMBER																						
DATE OF BIRTH			-			-												4				
	D	D		М	М		Y	Y	Y	Y		-								 		
TELEPHONE (HOME)				-								CEL	LPHO	NE			-					
TELEPHONE (WORK)				-								FAX					-					
CESSIONARY'S PHYSICAL	L A[ODF	RES:	S																		
COMPLEX / UNIT / HOUSE NUMBER																						
COMPLEX / ESTATE NAME						_																
STREET NUMBER																						
STREET NAME/ FARM NAME/ AREA NAME		T																				
SUBURB/ DISTRICT																						
CITY/ TOWN																						
COUNTRY																		CC	ODE			



CESSIONARY'S POSTAL A	ADDF	RES	S																								
POSTAL ADDRESS		SAME AS PHYSICAL ADDRESS																									
PO BOX NUMBER																											
POST OFFICE NAME																									Ī	Ī	
POSTAL CODE																											
PRIVATE BAG NUMBER																											
POST OFFICE NAME																									T	\Box	
POSTAL CODE																											
POSTNET SUITE NUMBER																											
PRIVATE BAG NUMBER																											
POST OFFICE NAME																					СО	DE					
		DATE													-			-									
SIGNATURE OF CESSIONARY		SIGNED AT												D	D		М	М			′	Υ	Y	Y			
TERMS AND CONDITIONS										0.0.		•				L											
1. If the cedent is a Trust, Company, Close Corporation, other juristic person or natural person acting for the Cedent, the signatory must submit written proof of this authority to effect this Cession. The Manager does not accept responsibility for the validity of this Cession. In the case of an absolute cession, the Cessionary must complete the relevant application form. 2. Please forward certified/verified copies of business requirement documents if not already on file. 3. The Cessionary agrees to provide all documentation and information required in terms of the Financial Intelligence Centre Act, No. 38 of 2001, and understands that the Manager is prohibited from processing transactions on the Client's behalf until all such documentation and information has been received. (Access the STANLIB website on www.stanlib.com to view the applicable FICA requirements). 4. The Client understands that all material facts must be accurately and properly disclosed and the accuracy and completeness of all information provided by or on behalf of the Client, is the Client's own responsibility. The Client understands that no FSP may request the Client to sign any written or printed form or document unless all details required to be inserted thereon by the Client or on behalf of the Client agrees that the Manager shall be entitled to implement all instructions and applications of whatever nature received on their Internet site, by telephone, by far or any other electronic medium and which appear to emanate from the Client. The Financial Adviser is indemnified against any losses, claims or damages arising from acting on such instruction and applications, notwithstanding that it may later be proved that any such instruction was not given by the Client. The Client agrees that the electronic records of all instructions and applications processed by/or on behalf of him/her or which purport to be processed on behalf of the Client via the Manager's Internet site, telefax, telephone or any other electronic medium shall constitute p																											
CEDENT'S DECLARATION																											
We are required to collect, process and share your Personal Information (PI). Your PI is collected and processed by our staff, representatives or sub-contractors and we make every effort to protect and secure your PI. You are entitled at any time to request access to the information STANLIB has collected, processed and shared.																											
I warrant that I am the legal owner investment. Please record this ces							nd h	ave o	cede	d to	the a	above	e Ce	ssior	nary	all ı	my	righ	ts, t	itle a	nd i	ntere	est i	n th	е		
SIGNATURE OF CLIENT/ AUTHORISED SIGNATORY									DA	TE							D	D	-	M	M	-		Y	Y	Y	Y

SIGNED AT