AL HaMb Asset Management	AL Habib A A wholly owned	d subsidiary of Bank AI			Ction ID:
: DDN C/NICOP/ rm No : punt Title :		Account Number :			
		REDEMPTION	DETAILS		
S. No.	Name of F	Fund/Plan	UNITS	OR	AMOUNT (Rs.)
1.				OR	
2.				OR	
3.				OR	
		e (NOC) from bank will be requ			
movement and Ve also confirm vern the transa e Management	impact cost. Further Contin having read and understoo ction including details of Sa Company that the proceed	y from Fixed Rate/ Return Fund ngent Load will be charged whi DECLARA od the Trust Deeds, Offering Do ales load to be deducted, taxes is invested in the Fund(s) are no t of my/our knowledge and bel	ch shall commensurate w TION cuments and FMR (also h thereon and in particular ot derived from money lan	vith net loss incur nanded over to m the risks disclos	rred due to early redem ne) of respective Fund(s sures. I/We hereby assur
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Ve also confirm vern the transa e Management nds declared is Signature ISTRIBUTOR We have explained plied any guarante ave not identified a mpany if I identify	having read and understoo ction including details of Sa Company that the proceed true and correct to the best says and correct to the best SALES AGENT UNDEF the risk of the Fund being sold t e with respect to return on invest any factor or event which may giv any such factor or event in future the, Signature or / and Stamp)	DECLARA DECLARA od the Trust Deeds, Offering Do ales load to be deducted, taxes ds invested in the Fund(s) are no t of my/our knowledge and bel Signature (For Office RTAKING: to the investor, including the possibiliti truent amount, nor quoted any fixed r ve rise to suspicion relating to money l	ch shall commensurate w TION cuments and FMR (also h thereon and in particular ot derived from money lau ief. Signature Use Only) y of principal being at higher ri eturn percentage or amount tc aundering and/or financing ter	handed over to m the risks disclos undering or illeg isk in case of high ris to the investor. rrorism about the Inv (Name, Signature	rred due to early redem ne) of respective Fund(s sures. I/We hereby assur tal activities and the sou Signature Signature sk funds. I/ we have neither m vestor. I will inform the Mana ture or / and Stamp) e of Immediate Supervisor