This form can be filled in on a computer; alternatively please print and complete fields in CAPITAL letters using black ink and tick ( $\checkmark$ ) where appropriate.

## FORM TO BE SUBMITTED TO

MCB Unit Trust
c/o The Principal Distributor, MCB Stockbrokers Ltd, Sir William Newton Street, Port Louis
T: (230) 202 5522; F: (230) 208 9210; E: mcbfunds@mcbcm.mu

## INSTRUCTIONS AND CONDITIONS

1. Switch request may be rejected if relevant instructions are not complied with.
2. Once completed, this form together with any relevant documents, should be forwarded to the Principal Distributor, whose mailing address is listed above.
3. Switch forms and all related documents should be forwarded to the Principal Distributor and/or the Manager before 1400 Hrs on any Dealing Day in order to be processed at the prices prevailing on that Dealing Day. All switch documents received after 1400 Hrs will be processed on the next Dealing Day. Dealing Days for all sub-fund(s) are every Friday, if the latter is a Mauritian Business Day, otherwise the next Mauritian Business Day will be used as the Dealing Day. No entry and exit fees will be charged on switch transactions. Switch fees are Rs.300, except for the first switch in a financial year which is free.
4. Within 10 business days of the Dealing Date, you will receive a Contract Note by post showing details of your switch transaction.
5. Investor Details

INDIVIDUAL ONLY
Primary Investor


Signature:

| Date: | $/$ | (dd/mm/yyy) |
| :--- | :--- | :--- | :--- |

Joint Investor


## CORPORATE INVESTOR ONLY

Legal Entity Name:

Contact
Person:

Phone:

Email:
Maximum 40 characters

## Signature:

## Name of

Signatory:

## Capacity:

Date:

Corporate's Seal:

## 2. Switch Details

The minimum number of units for a switch is 500 . Unitholders should at all times hold at least the minimum number of units which is 1,000 units for MCBOF - Retail Accumulation Class, MCBUBF - Retail Accumulation Class and the Target Date Funds and 50 units for the other subfunds. Your request will not be processed if the switch will cause a balance of less than the minimum number of units either in the fund(s) being switched in or in the fund(s) being switched out.

Please indicate the following switch details:

| Sub-Fund | Class | Switch Out <br> (\% or Number of Units) | Switch In <br> (\%) |
| :--- | :--- | :--- | :--- |
| MCB General Fund | MCBGF - Retail Income <br> Class |  |  |
| MCB Tracker Fund | MCBTF - Retail Income <br> Class |  |  |
| MCB Yield Fund | MCBYF - Retail Income <br> Class |  |  |
| MCB Domestic Equities Fund | MCBDEF - Retail Income <br> Class |  |  |
| MCB Overseas Fund | MCBOF - Retail <br> Accumulation Class |  |  |
| MCB USD Bond Fund | MCBUBF - Retail <br> Accumulation Class |  |  |
| MCB 2025 Target Date Fund | MCB2025TDF - Retail <br> Accumulation Class |  |  |
| MCB 2030 Target Date Fund | MCB2030TDF - Retail <br> Accumulation Class |  |  |
| MCB 2035 Target Date Fund | MCB2035TDF - Retail <br> Accumulation Class |  |  |
| MCB 2040 Target Date Fund | MCB2040TDF - Retail <br> Accumulation Class |  |  |

## FOR OFFICE ONLY

Received By:

Signature:

Signature Code:

Received On:

Deal Date:
$\square$ (dd/mm/yyyy)

- / (dd/mm/yyyy)

KYC Complete

Approval to process on register:

Seal of Manager:

