

INSTRUCTIONS: Please type all information in CAPITAL LETTERS. Fill out this form completely. Write N/A on fields that are not applicable and do not leave any blank spaces.

ACCOUNT DETAILS

Account Name			
Account Number			
Contact Number		Email Address	

FUND SWITCH DETAILS

Switch From (Source Fund)	Number of Shares/Units to Transfer	Switch To (Target Fund)

The redemption value from the source fund must meet the minimum investment amounts required by the target fund.

DECLARATION OF INVESTORS

I/We the undersigned registered owners of mutual fund shares/units, hereby request the fund switch of such shares/units at the applicable redemption price, as defined in the prospectus, which I/we warrant to have read and understood. Furthermore, for value received, I/we hereby sell, assign, and transfer unto the number of shares of the capital stock/offer units Of the Fund (less any fees) as indicated above and do irrevocably constitute and appoint the Fund's transfer of the said stock/units on the books of the within named corporation with full power of substitution in the premises.

I/We hereby attest and acknowledge that:

- All information disclosed is correct, complete and truly stated.
- Fund switch may be subject to further verification prior to processing and PhilEquity shall have at its sole discretion the right to accept or reject this form/fund switch instruction in such manner that it may deem appropriate;
- I/ We hereby waive the results of our risk assessment and have decided to invest instead in another fund which has a risk level that is higher than what is recommended. I/We fully understand that I/we am/are taking more risk in exchange for possible higher returns. I/We expressly agree to assume such risks. I/We shall indemnify and hold harmless the members of PEMI, its directors, officers, and employees for any claim, suit action, loss, damage, or expenses which might such indemnified persons and/or I may incur as a result of my decision to invest in products with higher risks.
- I/We will indemnify and hold free and harmless PhilEquity, its officers, employees and its representatives from any costs, losses, liabilities, damages or expenses whatsoever arising from the acceptance or rejection, delay or inaction and any unsuccessful crediting of the fund switch proceeds due to error or discrepancies from information provided on the PhilEquity forms.

For joint accounts, I/we declare under penalty or perjury that my/our co-investors are still living and that PhilEquity may at its discretion rely on such continuing declaration and representation.

		
Authorized Signatory 1 Signature over Printed Name	Authorized Signatory 2 Signature over Printed Name	Authorized Signatory 3 Signature over Printed Name

IMPORTANT REMINDERS

- ✓ Ensure your contact details are up to date to avoid delays in processing your redemption.
- ✓ Digital signatures are strictly prohibited and will cause your Fund Switch Form or instruction to be rejected.
- ✓ As proof of your fund switch, a Confirmation Notice will be sent to you not later than 7 business days with the number of shares/units redeemed and purchase at the corresponding Net Asset Value Per Share (NAVPS) / Net Asset Value Per Unit (NAVPU).
- ✓ Documents received by 12 noon cut-off will be processed within the same business day using the NAVPS/NAVPU for the day. Anything received past cut-off shall be processed the next business day applying the corresponding NAVPS/NAVPU for that day. Cut-off times may vary depending on your distributor or agent.
- ✓ Funds will be re-invested to the target fund on T+2 (If fixed income source fund) or T+4 (If equity source fund).
- ✓ Funds Switch Form should be submitted to your distributor or agent for initial verification. If you are a PhilEquity direct client, documents may be:
 - i. Submitted to PhilEquity Management Inc. at 15th Floor, PSE Tower, 5th Avenue corner 28th Street, Bonifacio Global City, Taguig City, 1634 or
 - ii. Emailed to invest@philequity.net (if enrolled to Electronic Mail Instructions).
- ✓ This document will be processed based on the date and time received by PhilEquity Management, Inc.


DISTRIBUTOR / AGENT ACKNOWLEDGEMENT

Date / Time Received		Distributor / Branch	
Received By		Confirmed for processing by	

PHILEQUITY USE ONLY

Date / Time Received		Date Processed		Date Verified	
Source of Document		Processor		Verified Thru	T M V Other _____
Received By		Authorizer		Verified By	

WRITE LEGIBLY



FUND SWITCH FORM (FSF)

DATE mm/dd/yyyy

15th Floor PSE Tower, 5th Avenue corner 28th Street, Bonifacio Global City, Taguig City, 1634
 (+632) 8250 8700 | invest@philequity.net | ask@philequity.net | www.philequity.net

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ACCOUNT DETAILS			
Account Name			
Account Number			
Contact Number	Email Address		

FUND SWITCH DETAILS			
Switch From (Source Fund)	Number of Shares/Units to Transfer	Switch To (Target Fund)	
Select One		Select One	
Select One		Select One	
Select One		Select One	
Select One		Select One	

The redemption value from the source fund must meet the minimum investment amounts required by the target fund.

DECLARATION AND INVESTORS		
<p>I/We the undersigned, defined in the proceeds defined in the number of shares of the said stock/units</p> <p>I/We hereby attest:</p> <ol style="list-style-type: none"> All information provided is true and correct. Fund switch form/fund transfer. If we have what is necessary to assume the damage, loss, or expenses. I/We will bear the error or discrepancies from information provided on the PhilEquity forms. 	<p>Number of Shares/Units to Transfer Divide your desired transfer proceeds by the latest NAVPs/NAVPU to get number of shares/units to transfer.</p> <p>Ensure that the transfer proceeds meets the minimum subscription amount required by the Target Fund. (ie. PhP 1,000 or PhP 500).</p>	<p>...ption price, asfer unto thend's transfer of ...</p> <p>...t or reject thisher thanree toit action, loss,r risks,s, damages orceeds due to ...</p>

For joint accounts, I/we declare under penalty of perjury that my/our co-investors are still living and that PhilEquity may at its discretion rely on such continuing declaration and representation.

Authorized Signatory 1	Authorized Signatory 2	Authorized Signatory 3
 Signature over Printed Name	 Signature over Printed Name	 Signature over Printed Name

IMPORTANT REMINDERS			
Contact details are up to date to avoid delays in processing your redemption.	Transfers are strictly prohibited and will cause your Fund Switch Form or instruction to be rejected.	Upon fund switch, a Confirmation Notice will be sent to you not later than 7 business days with the number of shares/units redeemed and the corresponding Net Asset Value Per Share (NAVPS) / Net Asset Value Per Unit (NAVPU).	Anything received by 12 noon cut-off will be processed within the same business day using the NAVPS/NAVPU for the day. Anything received past cut-off will be processed the next business day applying the corresponding NAVPS/NAVPU for that day. Cut-off times may vary depending on your distributor.

DISTRIBUTOR / AGENT ACKNOWLEDGEMENT			
Date Processed	Distributor / Branch	Confirmed for processing by	

PHILEQUITY USE ONLY			
Date Processed	Date Verified	Verified Thru	T M V Other
Processor	Verified By		
Authorizer			

Form: FSF v.2020

Select the Fund where the proceeds will be sourced.

Select the Fund where the proceeds will be transferred to.

Number of Shares/Units to Transfer
 Divide your desired transfer proceeds by the latest NAVPs/NAVPU to get number of shares/units to transfer.

Ensure that the transfer proceeds meets the minimum subscription amount required by the Target Fund.
 (ie. PhP 1,000 or PhP 500).

For Individual Account
 Sign once under Authorized Signatory 1

For Joint "OR" Account
 At least 1 investor must sign

For Joint "AND" Account
 All investors must sign

For ITF Account
 The beneficiary does not sign