

REDEMPTION ORDER FORM (ROF)

| 15th Floor PSE Tower, 5th Avenue corner 28th Street, Bonifacio Globa | al City, Taguig City, 1634 | DATE mm/dd/yyyy | | | | | |
|--|----------------------------|-----------------|--|--|--|--|--|
| (+632) 8250 8700 invest@philequity.net ask@philequity.net | www.philequity.net | **** | | | | | |

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.

| | | TRANSACT | TION DETAILS | |
|-----------------------|--|----------|---------------------------|---|
| Account Name | | | | |
| Account Number | | | Contact Number | |
| Fund Name | | | Email Address | |
| Redemption Type | Partial | Full | Number of Shares or Units | |
| Reason for Redemption | Realize profit / loss Not satisfied with in | | • | t, please specify: stment, please specify: |
| | | MODE OF | FPAYMENT | |

Check - for deposit to enrolled bank account

RTGS / PDDTS (all charges for the account of the investor)

Check – for pick up and encashment at PhilEquity head office

All redemption proceeds shall be made payable to the PhilEquity Account Name only. If you wish to change or enroll a bank account, please submit a Settlement Account Form.

IF PICK UP CHECK (OPTIONAL)

I/We hereby authorize my/our representative whose name and signature appears below, to pick up my/our redemption check from the PhilEquity head office. (The authorized representative must present one (1) valid ID upon pick up)

Signature **Complete Name**

DECLARATION OF INVESTORS

I/We the undersigned registered owners/trustees of mutual fund shares/units, hereby request the redemption 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 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:

- Redemption orders 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/redemption instruction in such manner that it may deem appropriate;
- Redemptions for deposit to bank accounts are subject to check clearing, redemptions made through RTGS / PDDTS are subject to bank charges and any stale checks will be subject to a penalty of Php 25.00;
- Any penalties or bank charges corresponding to my/our redemption will be deducted directly from my/our redemption proceeds;
- There are risks involved for my/our instruction to encash my/our redemption check (if applicable);
- For ITF account where the beneficiary is a minor. I/we declare that the redemption proceeds will be used solely for his/her benefit;
- 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, and
- 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 redemption proceeds due to error or discrepancies from information provided on the PhilEquity forms.



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.
- Use of digital signatures will cause your Redemption Instruction to be put on-hold and will require additional verification.
- As proof of your redemption, a Confirmation Notice will be sent to you not later than 7 business days with the number of shares/units redeemed 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.
- Redemption Order Forms should be submitted to your distributor or agent for initial verification. If you are a PhilEquity direct client, documents may be:
 - Submitted to PhilEquity Management Inc. at 15th Floor, PSE Tower, 5th Avenue corner 28th Street, Bonifacio Global City, Taguig City, 1634 (PEMI will not pick up deliveries to the PSE Tower lobby)
 - 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

| 7 This document will be | processed based on the date a | and time received | by Fillicquity Management, inc. | | |
|-------------------------|-------------------------------|-------------------|---------------------------------|---------------|-------------|
| | DI | ISTRIBUTOR / | AGENT ACKNOWLEDGEM | ENT | |
| Date / Time Received | | Dis | stributor / Branch | | |
| Received By | | Co | onfirmed for processing by | | |
| | | PHIL | LEQUITY USE ONLY | | |
| Date / Time Received | 1 | Date Processed | | Date Verified | |
| Source of Document | F | Processor | | Verified Thru | T M V Other |
| Received By | <i>I</i> | Authorizer | | Verified By | |



SETTLEMENT ACCOUNT FORM

|) | 15 th Floor PSE Tower, 5 th Avenue corner 28 th Street, Bonifacio Global City, Taguig City, 1634 | DATE mm/dd/yyyy | | | | |
|---|---|-----------------|--|--|--|--|
| • | (+632) 8250 8700 (a) invest@philequity.net ask@philequity.net www.philequity.net | **** | | | | |

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| | | | | GE | ENER | AL INF | ORM | ATIC | N | | | | | | | | | |
|--|---------|--------|------|-----|-------|--------|--------|-------|-------|-------|-----|------|--------|---------|--------|----------|-----|--|
| Account Name | | | | | | | | | | | | | | | | | | |
| Account Number | | | | | | | | | | | | | | | | | | |
| Email Address | | | | | | | Contac | t Nun | nber | | | | | | | | | |
| INVES | TOR'S I | PHILIF | PINE | BAN | IK AC | COUN | T DE | TAIL | S (Fo | or Re | dem | ptio | n Pu | rpos | es) | | | |
| Bank Name | | | | | | | | | | | | | | | | | | |
| Branch Name | | | | | | | | | | | | | | | | | | |
| Account Currency | | Peso | 1 | | Dol | lar | | | | | | | | | | | | |
| Type of Account | | Savir | ngs | | Che | ecking | | | | | | | | | | | | |
| Bank Account Name | | | | | | | | | | | | | | | | | | |
| Bank Account Number | | | | | | | | | | | | | | | | | | |
| The bank account Your bank account | | | • | | • | | | • | | | | | truste | es' nar | nes wi | II suffi | ce. | |

DECLARATION OF INVESTORS

I/We hereby attest and acknowledge that:

- 1. I/We am/are the registered owner/trustee of the mutual fund shares/units and hereby request to effect the instruction/s indicated above which may serve as our standard settlement instruction.
- 2. The provided bank information will be applied to my/our PhilEquity account indicated above, any further changes will be communicated to PhilEquity with a revised Settlement Account Form signed by all investors.
- 3. I/We accept, give full consent and agree to abide by the General Terms and Conditions, a copy of which was provided to me/us together with any and all amendments made thereto from time to time.
- 4. For ITF account where the beneficiary is a minor, I/we declare that the redemption proceeds will be used solely for his/her benefit. In case the beneficiary reaches the legal age, the redemption proceeds in the form of cheque will be made payable to his/her name unless otherwise approved by him/her. The bank account provided above will not be used.
- 5. I/We hold PEMI, its officers and representatives, free and harmless from any and all claims, liabilities, damages and suits of whatever nature arising out of or in connection with the changes indicated above.







Authorized Signatory 1
Signature over Printed Name

Authorized Signatory 2
Signature over Printed Name

Authorized Signatory 3Signature over Printed Name

IMPORTANT REMINDERS

- Ensure your contact details are up to date to avoid delays in processing your instruction.
- Digital signatures are strictly prohibited and will cause your instruction to be rejected.
- Documents received by 12 noon cut-off will be processed within the same business day. Anything received past cut-off shall be processed the next business day. Cut-off times may vary depending on your distributor or agent.
- Settlement Account Form should be submitted to your distributor or agent for initial verification. If you are a PhilEquity direct client, documents may be:
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 - ii. Emailed to invest@philequity.net (if enrolled to Electronic Mail Instructions).
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| | DISTRIBUTOR / AGENT ACKNOWLEDGE | MENT |
|--------------------------|---------------------------------|------|
| Date / Time Received | Distributor / Branch | |
| Received By | Confirmed for processing | by |
| | PHILEQUITY USE ONLY | |
| Date / Time Received | Date Processed | |
| Source of Document | Processor | |
| Received By | Date Authorized | |
| Effective Date of Change | Authorizer | |



Redemption Order Form

WRITE LEGIBLY

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
 www.philequity.net



Reason for

Redemption

REDEMPTION ORDER FORM (ROF)

DATE mm/dd/yyyy

Financial requirement, please specify:

Transfer to other investment, please specify:

Write your Philequity Account details

Fund Name - Choose from the dropdown list

Redemption Type

Partial - you will be leaving a portion of your shares/units in the selected fund

Full – you will be redeeming all shares/units in the selected fund

Number of Shares or Units

Divide your desired redemption proceeds by the latest NAVPs/NAVPu to get number of shares or units to be redeemed.

Reason for Redemption Select One

Mode of Payment

Select One

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

| | | | TRANSACTION | DETAILS | |
|---|-----------------|------------|-------------|---------------------|--|
| 1 | Account Name | | | | |
| | Account Number | | | Contact Number | |
| | Fund Name | Select One | | Email Address | |
| N | Redemption Type | O Partial | O Full | Number of Shares or | |

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| MODE OF PAYME |
|----------------|
| mode of tarmer |

Not satisfied with investment

Realize profit / loss

Check – for deposit to enrolled bank account Check – for pick up and encashment at PhilEquity head office RTGS / PDDTS (all charges for the account of the investor)

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Complete Name Signature

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 For ITF account where the beneficiary is a minor, I/we declare that the redemption proceeds will be used solely for his/her benefit;
- 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; and
- l/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 redemption proceeds due to error or discrepancies from information provided on the PhilEquity forms.





Authorized Signatory 1

3

Authorized Signatory 2 Signature over Printed Name

Authorized Signatory 3 Signature over Printed Name

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 PEMI will not pick up deliveries to the PSE Tower lobby)

 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.

| I nis document will be | processed based on the date and | a time received b | by PhilEquity Management, Inc. | | |
|------------------------|---------------------------------|-------------------|--------------------------------|---------------|-------------|
| | DIST | TRIBUTOR / A | AGENT ACKNOWLEDGEN | IENT | |
| Date / Time Received | | Dist | tributor / Branch | | |
| Received By | | Cor | nfirmed for processing by | | |
| | | PHILI | EQUITY USE ONLY | | |
| Date / Time Received | Dat | te Processed | | Date Verified | |
| Source of Document | Pro | ocessor | | Verified Thru | T M V Other |
| Received By | Aut | thorizer | | Verified By | |

Form: ROF v 09 2025



Settlement Account Form

WRITE LEGIBLY

| PhilEque 15th Floor PSE Tower, 5th Avenu | | Global City, Taguig City, 1634 | DATE mm. | Addlyyyy |
|---|---|--|--|--|
| (+632) 8250 8700 (invest@) | | | | |
| INSTRUCTIONS: Please type all in | formation in CAPITAL LETTE | RS. Fill out this form completely. V | Vrite N/A on fields that are n | ot applicable and do not leave any blank s |
| | | GENERAL INFOR | RMATION | |
| Account Name | | | | |
| Account Number | | | | |
| Email Address | | Con | tact Number | |
| INVES. | TOR'S PHILIPPINE | BANK ACCOUNT D | ETAILS (For Rec | demption Purposes) |
| Bank Name | | | | |
| Branch Name | | | | |
| Account Currency | Peso | Dollar | | |
| Type of Account | Savings | Checking | | |
| Bank Account Name | | <u> </u> | | |
| Bank Account Number | | | | |
| | name should match your | PhilEquity account name of | yeart for ITE accounts | where the trustees' names will suf |
| | • | ions in accepting check pay | • | |
| | | DECLARATION OF I | NVESTORS | |
| The provided bank i with a revised Settle IWe accept, give ful all amendments mac For ITF account wh beneficiary reaches him/her. The bank a | ment Account Form signed Il consent and agree to ab de thereto from time to tim ere the beneficiary is a re the legal age, the redemple account provided above wi | d by all investors. ide by the General Terms and e. ninor, I/we declare that the r tion proceeds in the form of ch II not be used. | Conditions, a copy of will edemption proceeds will be made payal | rther changes will be communicated hich was provided to me/us together be used solely for his/her benefit. ble to his/her name unless otherwise |
| | on with the changes indica | | ny and all claims, liabilitie | es, damages and suits of whatever r |
| | SAE NE | Ath | EN 34C | A |
| | | | atory 2 | Authorized Signatory |
| Authorized Sign Signature over Prin | | Authorized Sign Signature over Prin | ted Name | Signature over Printed Na |
| Signature over Prin | ited Name | Signature over Prin | MINDERS | Signature over Printed Na |
| Signature over Prin Ensure your contact detai Digital signatures are situ Documents received by business day, Cut-off time Settlement Account Form i. Submitted to Pl (PEMI will not p. ii. Emailed to inve | ils are up to date to avoid city prohibited and will cau: 12 noon cut-off will be p as may vary depending on should be submitted to ychilEquity Management Inc. ick up deliveries from the st@philequity.net (if enroll st@philequity.net (if enroll stage) in the stage | Signature over Prin IMPORTANT REN delays in processing your insta se your instruction to be reject rocessed within the same bu your distributor or agent. or understibutor or agent for initia .at 15 th Floor, PSE Tower, 5 th | AINDERS ruction. ed. usiness day. Anything re al verification. If you are a Avenue corner 28 th Street | Signature over Printed Ni eceived past cut-off shall be proces a PhilEquity direct client, documents et, Bonifacio Global City, Taguig City, |
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| Signature over Prin Ensure your contact detai Digital signatures are situ Documents received by business day, Cut-off time Settlement Account Form i. Submitted to Pl (PEMI will not p. ii. Emailed to inve | its are up to date to avoid a tity prohibited and will cau 12 noon cut-off will be pes may vary depending on should be submitted to y hill Cutil Management Inc. bick up deliveries from the st@philequity.net (if enroll cessed based on the date | Signature over Prin IMPORTANT REM delays in processing your instruction to be reject rocessed within the same bu your distributor or agent. The price of the pri | AINDERS ruction. ed. siness day. Anything re al verification. If you are a Avenue corner 28 th Stree ons). ity Management, Inc. | eceived past cut-off shall be proces a PhilEquity direct client, documents et, Bonifacio Global City, Taguig City, |
| Signature over Prin Ensure your contact detai Digital signatures are stric Documents received by business day. Cut-off time Settlement Account Form Submitted to PI i. Submitted to rive (PEM will not p. ii. Emailed to inve This document will be pro | its are up to date to avoid a tity prohibited and will cau 12 noon cut-off will be pes may vary depending on should be submitted to y hill Cutil Management Inc. bick up deliveries from the st@philequity.net (if enroll cessed based on the date | Signature over Prin IMPORTANT REM delays in processing your instruction to be reject rocessed within the same bu your distributor or agent. The principle of the processed of | AINDERS ruction. red. sisness day. Anything re al verification. If you are a Avenue corner 28 th Stree ons). ity Management, Inc. KNOWLEDGEME or / Branch | eceived past cut-off shall be proces a PhilEquity direct client, documents et, Bonifacio Global City, Taguig City, |
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Write your Bank Account details

Write your Philequity Account

Ensure your bank account is:

- Not closed;

details

- Not dormant; or
- Non-existent

For Individual Account Sign once under Authorized Signatory 1

For Joint "OR" Account

All investors must sign even if the account type is Joint "OR" to ensure all investors acknowledge and agree to the bank account

For Joint "AND" Account All investors must sign

For ITF Account

The beneficiary does not sign