

MCB UNIT TRUST Redemption Form

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

FORM TO BE SUBMITTED TO

MCB Unit Trust

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

INSTRUCTIONS AND CONDITIONS

- 1. Redemption requests may be rejected if relevant instructions are not complied with. Once completed, this form, together with any relevant documents, should be forwarded to the Principal Distributor, whose mailing address is found above.
- 2. Units will be repurchased at the ruling Repurchase Price at the time the Redemption Form is received at the office of the Principal Distributor and/or the Manager and accepted by it. The Redemption Form and all related documents should reach the Principal Distributor and/or the Manager before 14.00 hrs on any Dealing Day in order to be processed at the Repurchase Price prevailing on that Dealing Day. All redemption requests received after 14.00 hrs will be processed at the following Dealing Day's Repurchase Price. 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.
- 3. Within 10 business days of the Dealing Date, your bank account will be credited with the redemption proceeds and you will receive a Contract Note by post showing details of your redemption. Please note that for non MCB bank account, you may encounter a delay of up to 2 business days even if the payment is initiated within the agreed 10 business days deadline.

1. Investor Details								
Primary Investor/Corporate Investors								
Title:	Mr	Mrs	Miss	Honorary Title:				
First Name:								
Last Name:								
National ID	:			OR Passport Number:				
Phone Nun	nber:			Mobile Number:				
Joint Investors								
Title:	Mr	Mrs	Miss	Honorary Title:				
First Name:								
Last Name:								
National ID	:			OR Passport Number:				
Phone Number:				Mobile Number:				

nitial	S:		

2. Bank Account Details							
Proceeds of your redemption will be credited to your bank account (MCB clients only). The account must be in the name of the (primary) investor. Please provide the upper part of a recent bank statement showing clearly the names and account number to validate.							
Bank Name: The M	Bank Name: The MCB Ltd						
Branch:							
Account Type:							
Account Number: 0 0 0							
Account in the name of	:						
3. Redemption Deta	nils						
The minimum redemption amount is MUR1,500 for all MUR-denominated funds and \$500 for the MCBUBF - Retail Accumulation Class. Unitholders should at all times hold at least the minimum number of units*. If your request for redemption will leave a balance of less than the minimum number of units, the Manager may cause the redemption of all your units with the current request.							
		Number of Units to be redeemed	OR Indicative Amount to be redeemed*	Plan Number			
Educational/ Retireme	nt/ Investment Plan						
Sub-Fund	Class	Number of Units to be redeemed	OR Indicative Amount to be redeemed*	Currencies Allowed			
MCB General Fund	MCBGF - Retail Income Class			MUR			
MCB Tracker Fund	MCBTF - Retail Income Class			MUR			
MCB Yield Fund	MCBYF - Retail Income Class			MUR			
MCB Domestic Equities Fund	MCBDEF - Retail Income Class			MUR			
MCB Overseas Fund	MCBOF - Retail Accumulation Class			MUR \$ £ €			
MCB USD Bond Fund	MCBUBF - Retail Accumulation Class			\$			

MCB 2025 Target Date

MCB 2030 Target Date

MCB 2035 Target Date

MCB 2040 Target Date

Fund

Fund

Fund

Fund

MCB2025TDF - Retail

MCB2030TDF - Retail

MCB2035TDF - Retail

MCB2040TDF - Retail

Accumulation Class

Accumulation Class

Accumulation Class

Accumulation Class

MUR

MUR

MUR

MUR

^{*}Minimum holdings: for MCBGF- Retail Income Class, MCBTF- Retail Income Class, MCBYF- Retail Income Class and MCBDEF- Retail Income Class: 50 units; for MCBOF- Retail Accumulation Class: 1,000 units; for MCBUBF- Retail Accumulation Class and and the Target Date Funds: 100 units.

^{*} Amount actually redeemed may differ slightly from the requested amount, due to rounding, but will at least be equal to the latter. Units in the sub-funds will be redeemed in the same proportion as the investment choice for part redemption of an Investment / Education Plan.

^{*} Where a Unitholder indicates that ALL Units are to be redeemed, a situation may arise where units are allocated after this dealing date by way of dividend reinvestment or automatic investment of a residual direct debit amount. In these circumstances, the Manager shall be entitled to automatically proceed with the sale of the newly-allocated units at the next feasible dealing date.

You confirm tha *Corporate investors: Co										
,		orations should sign under the hand of a duly authorised official and shou Primary Investor / Corporate Investor*						- 1 Tonowi	Joint Investor / Corporate Investor*	
Sign	gnature:							Signature:		
						If more than one signature needed				
Nan	ame:							Name:		
Cap	pacity:							Capacity:		
Date	ite:	/		/		(dd/m	m/yyyy)			
								Corporate's	Seal:	
						OR OFFI	CE LISE	ONIV		
								USE ONLY		
Introducer's Name	ne:									
Received on:		/	/			(dd/mm/yy	yy)			
Copy of Upper par	art of Banl	k Stateme	nt includ	ed:						
Introducer's Seal:	:									
				FOF	к мсв	CAPITAL	. MARK	ETS' USE ON	ILY	
Received By:										
Received on:		/	/			(dd/mm/yy	уу)			
Deal Date:		/	/			(dd/mm/yy	уу)			
Approval to process on Register:										
Seal of Manager:										