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		(DE)	-	MM	-	YY)	
ABL AMC A/C #								

Conversion Form - Mutual Funds

Form 4

		FOR INDIVIDUAL	S & INSTITU	THONS				
1 PRINCIPAL ACCOUNT HOLE	DER							
Investor Name:								
CNIIC (NIIC OD) Decement No.			NITNI					
CNIC/NICOP/ Passport No. (In case of Indiviual)			NTN (In case of Corpo	rate Client)				
2 CONVERSION DETAILS								
Fund Nar	ne For Transfer		Transfe	r Particular Either In Nu	ımber Of Units O	r In Amounts (PKR)		
From Fund Name/ Unit Type	Fund N		No. of Units OR Amounts (PKR)					
In case of certificates issued, kindly attach the issue	d certificate(s), without v	which transfer of units to the othe	er Fund(s)/ Plan(s) wi	II not be processed				
3 RISK PROFILE OF CIS/ PLANS								
	5 1/51 N							
	Fund / Plan Nam	ne		Risk Profile	Risk C	Of Principal Erosion		
ABL Cash Fund ABL Islamic Cash Fund ABL Market Fund (ABL Islamic Money Market Pla Fund		Low	Low Princip					
ABL Government Securities Fund	I I ABL Islamic Sovereig	Modrate	Princ	Principal at Moderate Risk				
ABL Income Fund, ABL Islamic Income F Islamic Asset Allocation Fund I ABL FPF (Co Financial Pla		Medium	Principal at Medium Risk					
ABL FPF (Active Allocation) I ABL IF ABL Islam	PF (Active Allocation,A nic Stock Fund I Allied F	High Prir		incipal at High Risk				
4 DECLARATION AND SPECIM	IEN SIGNATURE (OF ACCOUNT HOLDER(S)					
If we have carefully read, understand and agree to abide by all the rules, regulations, relevant Trust Deed(s), Offering Documents, guidelines (on the back of this form) that govern this transaction, terms and conditions given in the form/ constitutive documents along with details of Sales Load (if any) to be deducted including taxes. It we am/are fully informed and understand that investment in units of CIS(s) are not bank deposit, not guaranteed and not issued by any person. Shareholders of ABL Funds are not responsible for any loss to investor resulting from the operations of any CIS launched by ABL Funds unless otherwise mentioned. It we have understood that past performance of the fund is not necessarily an indicator of future results and there is no fixed or guaranteed return. It we acknowledge and accept that ABL AMCL reserves the right to close or suspend without prior notice, my/ our account if required document/information is not submitted within stipulated time. It we understand that this CIS Risk Categorization will help me/ us assess my/ our risk appetite based on the information provided by me/ us. I am/ we are aware that my/ our financial needs may change over time depending on my/ our personal and situation objectives. If we shall be solely responsible for all of my/ our current and future conversion transactions if these transactions are not in accordance with my/ our risk profiling results in this form. If we will not hold ABL AMCL liable or responsible for these transactions in any manner.								
Signature	Signature	Signature	Signature		Rubber Stamp (In case of Institutional Client)			
Sales Load (A) and all Taxes Rebate (B)			Net Loa	d Charged (A-B)	Investo	or's Signature		

5	RISK PROFILING									
J	KISK PROFILING									
wi		ould not consti	itute as specific advice. \	'ou sh	s, risk/return expectation that will translate your needs into a ould make your fund allocation based on your own judgmer on in the given space.					
1	1 Age in (years)				Level of Understanding & Knowledge	3	Your Investment Horizon			
	Above 60 years		1		Less / Limited Knowledge 1			Less than or equal to 1 year	1	
	Between 46 to 60 years				Average	2		Greater than 1 year but less than 3 years	2	
	Between 31 to 45 years		3		Good	3		Greater than 3 years but less than 5 years	3	
	Between 18 to 30 years		4		Expert	4		Greater than 5 years	4	
	Score		- 4		Score			Score		
	Score									
4	Primary Investment Obje	ective		5	Your Risk Tolerance		6	Of my Current Income, I am able to save up to:		
	Preserving Capital		1		Low Risk: Cut losses immediatel and II uidatell investments. Capital preservation is paramount. Medium Risk: Cut your losses and transfer investments	1	Ш	<=5%	1	
	Regular Income		2		Medium Misk: Cut your losses and transfer investments to safer asset classes. High Risk: You are ok with volatility and accept decline in portfolio value	2	Ш	6% to 10%		
	Capital growth		3		as a part of investing. You would keep your investments as they are Very High Risk: You would add to your investments to bring the	3		11% to 25%	3	
	Highest Potential Return		4		average buying price lower. You are confident about your investments and are not perturbed by notional losses	4		> 25%	4	
	Score				Score			Score		
7	Existing Investments -	Equities		8	Existing Investments Others			Current Liabilities or Borrowings		
	Up to PKR 100,000		1		Up to PKR 100,000	1		More than PKR 1,500,000	1	
	PKR 100,001-500,000		2		PKR 100,001-500,000 2			PKR 500,001 - 1,500,000	2	
	PKR 500,001-1,500,000 3				PKR 500,001-1,500,000 3			PKR 100,001 - 500,000	3	
	More than PKR 1,500,000 4				More than PKR 1,500,000 4			Up to PKR 100,000	4	
	Score				Score			Score		
	Total Score (Sum of score for questions 1-9)									
		Score	Risk Profile		Category of CIS Plan			Fund / Plan Name		
Your Portfolio 16-22 Moderate 23-29 Medium 30-36 High		Low	Money Market Scheme, Shariah Compliant Money Market Scheme, Fixed Rate /Return Scheme, Capital Protected Scheme (Non-Equity)			ABL Cash Fund, ABL Islamic Cash Fund, t ABL Money Market Fund (ABL Money Market Plan-I), ABL Islamic Money Market Fund (ABL Islamic Money Market Plan-I) ABL Fixed Rate Fund (ABL Fixed Rate Plans), ABL Special Savings Fund (ABL Special Savings Plans)				
		Moderate	Income Scheme, Shariah Compliant Income Scheme			ABL Government Securities Fund I ABL Islamic Sovereign Fund(ABL Islamic Sovereign Plan-I)				
		Medium		Scheme, Shariah Compliant Asset Allocation			ABL Income Fund, ABL Islamic Income Fund, ABL Financial Sector Fund (ABL Financial Sector Plan-I), ABL Islamic Asset Allocation Fund, ABL FPF (Conservative Allocation), ABL IFPF (Conservative Allocation), ABL AMC Financial Planner - (Moderate Plan, Dynamic Plan)			
		High	Asset Allocation Scheme, Equity Scheme, Shariah Compliant Equity Scheme, Fund of Fund Scheme, Shariah Compliant Fund of Fund Scheme			Allied Finergy Fund, ABL Stock Fund, ABL Islamic Stock Fund ABL FPF (Active Allocation), ABL IFPF (Active Allocation, Aggressive Allocation), ABL AMC Financial Planner - Aggressive Plan				
Declaration If we understand that this risk profiling questionnaire will help me/ us assess my/ our risk appetite based on the information provided by me/ us. I am/ we are aware that my/ our financial needs may change over time depending on my/ our personal and situation objectives. If we shall be solely responsible for all of my/ our current and future investment, conversion and transfer transactions if these transactions are not in accordance with my/ our above-mentioned risk profiling results. If we will not hold ABL AMCL liable or responsible for these transactions in any manner.										
	'If you disagree with the su	iggested fund	ds as per your risk pro	filing	score and wish to invest in different funds, you may c	hoose th	e ove	rride option given below".		
					Agree	Ov	erride	e		
								Principal / Joint Account Holder Signati	ure	

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6 RISK DISCLOSURE STATEMENT	
To be filled by the Investor	
الا we confirm that I am/ we are investing in	n to invest in any other fund category. I/ Trust Deeds and Supplemental Offering میں/ ہم اس بات کی تصدیق کرتے ہیں کہ میں/ ہم اے ایم سی ایل گؤئی بھی نقصان کیلئے ذتے دار نہیں تشہرا ئیر
Dated	
	Principal / Joint Account Holder Signature

7 UNDERTAKING								
Undertaking by Investor I/ we_ explained, disclosed and understood by me/ us		ake that the risk a	associated with th	ne respective product has been adequa	ately			
Dated			Principa	oal / Joint Account Holder Signature				
Undertaking by Sales Agent I/ wehereby confirm the following: I/ we have explained the risk of the fundbeing sold to the -investor. I/ we have explained that the possibility of principal being at risk is higher in case of high risk funds. I/ we have not made or implied any guarantee with respect to return on investment amount. I/ we have not quoted any fixed return percentage or amount to the investor.								
Signature of Sales Agent				Name & Signature of Immediate Supervisor	or			
Dated				Dated				
8 GENERAL INSTRUCTIONS & GUIDELINI	ES							
 Fill the form in block letters and in legible handwriting to avoid errors in application processing. If any alteration is made, a countersign is mandatory. Fill the form yourself or get it filled in your presence. Do not sign and/or submit blank forms. Please tick in the appropriate box wherever applicable, incase any field is not relevant, please mark 'N/A' (Not Applicable) It is the responsibility of the applicant to carefully read and understand the guidelines and instructions provided in this form and the terms and conditions, especially risk disclosure, disclaimer, warning statement, investment objective in the Offering Document of the Funds Applications incomplete in any respect and/or not accompanied by required documents are liable to be held or rejected until complete requirements are fulfilled. Applications complete in all respects should be submitted at any branch of Allied Bank, Authorized Distributor, or courier them at ABL AMC's Office: 48, Block- L, DHA Phase VI, Near Defence Raya Golf Club, Lahore. For more information about our products and services call at 042 111 225 262 or email at contactus@ablamc.com. Please refer to the next section for name of the fund. Transfer of units from one Fund to another will be made in accordance with the constititive documents. It should be the responsibility of the applicant to pay all charges and taxes in relation to the units purchased by him/her. Application will be processed as per cut-off timings for the Fund/ Plan. In case of any change in authorized signatory(ies) of corporate investors, please attach Board Resolution and updated list of authorized signatories with specimen signatures duly stamped and certified by the company secretary. 								
9 DISTRIBUTOR / FACILITATOR INFORMATION (For Office Use Only)								
ABL AMCL Sales Staff /Investment Faciliat	or Name /Distributor	Branch Code		ABL Branch's Staff Name				
Authorised Signature of ABL AMC Investment facilitator/Distributor (Rubber Sta			ABL	L Branch Stamp with two officers' signature				
10 FOR ABL AMC OFFICE USE ONLY								
Transaction Date	Transaction No. Form Received on:							
Originator Staff No.	Data and attachments verifie	d by		Signature Operations Department	t			

Get in Touch

(invest" to 8262 **(042-111-225-262 (Website : www.ablfunds.com**

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