

AUTOMATIC REBALANCING FORM

All duly signed written instructions must reach the business office of Areca Capital Sdn. Bhd. ("ACSB") before 2.30pm for them to take effect on the same Business Day.

Please complete in BLOCK LETTERS and tick (V) where applicable.

A. PARTICULARS OF ACCOUNT HOLDER(S)																	
Principal Holder/Company Name																	
Joint Holder(s) Name (for Individual Account, where applicable) Account Number																	

B. AUTOMATIC REBALANCING REQUEST

1. CREATE OR CHANGE YOUR TARGET WEIGHTING

Fund Name	TARGET ALLOCATION PERCENTAGE (%) (A minimum of 5% is required)						
TOTAL	100% (Allocation must be total 100% and only whole percentages are permitted)						

2. REBALANCING TRIGGER

Rebalance based on Frequency:	Monthly Quarterly Semi-Annually Annually	
Rebalance based on Variance:	>1% >2% >3% >4% >5% Others, please specify:	

Notes:

- Upon trigger of rebalancing, these funds will be rebalanced as per the target allocation percentage set up in the table above.
- Rebalancing will be carried out on the 15th of the applicable month. If the transaction date falls on a non-business day (weekend or holiday), the rebalancing will take place on the next business day.
- Investors should carefully consider the investment objectives, risks, fees, charges and expenses associated with the switching of fund before investing. This and other information are available in the Prospectus(es)/Information Memorandum(s).
- Switching is subject to the minimum additional investment set by the respective funds and Terms & Conditions of buy/sell of units.
- This instruction is to remain in force from the Commence Date until further notice in writing from Account Holder(s).

C. DECLARATIONS, ACKNOWLEDGEMENT OF LIABILITY AND INDEMNITY BY ACCOUNT HOLDER(S)

I/We hereby confirm, acknowledge and agree that I/we irrevocably and unconditionally indemnify ACSB at all times against all claims, demands, actions, suits, proceedings, damages, losses, costs (including legal costs as between solicitor and own client) and expenses and all other liabilities of whatsoever nature or description which may be made or taken against or incurred or suffered by ACSB in any manner arising out of or by reason of or in consequences of ACSB acceding to my/our request or any part thereof as a result of any false or inaccurate declaration herein, except for the gross negligence and wilful default on the part of ACSB. I/We agree that my/our indemnity herein shall be a continuing indemnity and shall bind my/our successors-in-title and is without prejudice to and is in addition to any other rights and remedies which ACSB may have against me/us. This indemnity shall be construed in accordance with the laws of Malaysia and I/we agree to submit to the non-exclusive jurisdiction of the courts of Malaysia.

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D. SIGNATURE(S)

I/We hereby authorise ACSB to automatically rebalance my/our account based on the variance and frequency stated above by switching investments to return to my/our target fund mix based on the instructions given above. I/We have read and fully understood the Terms and Conditions in the Product Highlight Sheet and Prospectus(es)/Information Memorandum(s) of the unit trust fund(s) and agree to abide by the same, including any amendments made thereto from time to time.

Please do not pre-sign or sign an incomplete form. Please affix company's stamp here.

Signature	Signature	Signature
Name:	Name:	Name:
Date:	Date:	Date:

FOR ARECA AUTHORISED UTSC USE ONLY							
ARECA AUTHORISED UTSC DETAILS							
Signature:	Name:	FIMM Code:					
MEETING NOTES							
Date:	Time:	Location:					
Other Information:							

FOR OFFICE USE BY ACSB						
FOR AUTHORISED OFFICER USE ONLY						
Processed by:	Transaction Date:					
Notes:	1					