# CHANGE OF RECURRING INSTRUCTIONS



#### Instructions

- 1. This application and supporting documentation must be emailed to instruct@ashburtoninvest.co.za.
- 2. Please complete all relevant sections of this application in order for us to process this instruction.
- 3. Terms and Conditions are available on our website at www.ashburtoninvestments.com, our Client Service Team on 0860 274 287 or your financial advisor. By signing this form you acknowledge that you have read and understood these, and that you will be bound by such Terms and Conditions.
- 4. All valid instructions received before 2pm on a business day, will be processed on the same day and receive the closing price of the following business day.
- 5. Please refer to the Checklist available on our website for Financial Intelligence Centre Act (Act No. 38 of 2001) ("FICA") documents required.
- 6. The Administrator will only process this application when all required documents are received.

The investor/financial services provider ("FSP")/authorised representative hereby agrees to provide all documentation and information required in terms of FICA, and understands that the Administrator is prohibited from processing any transaction on his/her behalf until all such documentation and information has been provided and the Administrator has satisfied itself that all requirements have been met.

FNB Investor Services Proprietary Limited ("Administrator"), Registration Number 2011/139123/07, is an authorised administrative financial services provider (FSP Number 44341) and is the administrator of this investment.

1. Investor details				
Investor ID:		Contract number	r:	
Individual investor				
Title:	Surname:			
First name(s):				
ID/Passport number:				
Date of birth:	Y Y Y Y M M D D	Telephone numb	per:	
Person acting on behalf of inv	vestor			
Title:	Surname:			
First name(s):				
ID/Passport number:				
Date of birth:	Y Y Y Y M M D D	Telephone numb	per:	
Legal entities				
Registered name:				
Registration number (company, clos	se corporation, trust, etc.)			
Telephone number:				
2. Change or new addition	al recurring investments			
This change can only apply to the form of the following properties of the following pr				
Please indicate the source of funds:	_		(5. )	
<ul><li>Existing Investor Platform acc</li><li>Transfer from other financial s</li></ul>	_		ngs/Bank account ets of trust/Investment company	<ul><li>☐ Property sale</li><li>☐ Salary</li></ul>
Bonus	.S. 11055 Provider miletitat			
Other (specify):				

Please note that in certain circumstances we may request additional information.

Please only complete this section if you are changing your recurring investment instruction.	
Cancel recurring investment instruction	
Change recurring investment instruction (complete details below, this automatically cancels the existing debit order instructions)	
Reinstate debit order (complete details below)	
New debit order (complete details and the debit order authority below)	
Change debit order bank details (complete debit order authority below)	
Debit order frequency:	
☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Annually	
Debit order deduction date:	
□ 01 or □ 16 or □ 21 or □ 26 of M M Y Y	
Please note that if no debit order deduction date is selected by the investor the first of the month will be used.	
	24
First debit order date: Y Y Y M M D D Annual escalation	n: <u>%</u>
Next escalation date:	d for Endowments is 20%.
Recurring investment amount: R	
Investment allocation	
Instrument name	Recurring %
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
Ashburton Money Market Fund - Fee Account	%
Total	100%
Total	100 /0
Please note that Personal Share Portfolios are not available for recurring investments.	
Debit order and once-off debit authority	
If the bank account for debit orders is different to the one on record please complete bank details for debit orders and/or once-off debits Please supply proof of bank details (a cancelled cheque or relevant bank statement or letter on bank's letterhead with bank stamp not old	
Name of bank:	
Branch code: Branch name:	
Account name:	
Country:	
Account no.:	
Type of account: Savings	

I hereby authorise the Administrator to draw direct debits against the bank account specified. Direct debits can only be processed from a South African bank account. Units bought with a direct debit can only be redeemed after 40 calendar days. If the bank account holder is not the same as the investor (3rd party contribution) then the actual account holder must sign below as authority to debit their bank account and must provide full FICA documentation as per the requirements listed in the Checklist available on our website. If the bank account holder is not the investor, he/she acknowledges that the Administrator does not make third party payments, in other words, payment will only be made to the investor unless the investor is a minor.

The Administrator will debit your account within 2 business days of receiving a valid and complete application and supporting documents or on the date specified on the application form. In the event that the collection day falls on a Sunday or a recognised South African public holiday, the collection day will automatically be the next ordinary business day.

I agree that although this authority and mandate may be cancelled by me, such cancellation will not cancel this investment. I shall not be entitled to any refund of amounts which the Administrator has withdrawn while this authority was in force.

I acknowledge that this authority may be ceded or assigned to a third party if this investment is ceded or assigned to that third party, but in the absence of such assignment of this investment, this authority and mandate cannot be assigned to any third party.

Please note that the reference for the direct debit on your bank account will be "<FNB Invest><Investor ID-Contract number>".

Please ensure that the account the Administrator is debiting allows debits.

Signature of investor/bank account holder:	Date:	YYYY	M M D D
3. Change or new regular disinvestments			
This change can only apply to the following FNB products:  FNB Investment Account  FNB Endowment (only after first five year restriction period)			
Please only complete this section if you are changing your regular disinvestments options.			
Cancel regular disinvestments instruction  Change regular disinvestment instruction (complete details below)  Commence regular disinvestment instruction (complete details below)  Amount per frequency:  R  R  Pirst payment due:  Pirst payment due:  Pirst payment due:  Pirst payment due:  Debit order frequency:			
☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Annually			
Annual date:   Y Y Y M M 2 5	A	Annual escalation:	%
Select disinvestment allocation option  Proportionately across fund selection (default option)  From specific funds, complete table below (if funds are depleted allocation will change to proportional depleted allocation depleted alloc	ortionately)		

## Disinvestment allocation

Instrument name	Fund class	Amount	Percentage
		R	%
		R	%
		R	%
		R	%
		R	%
		R	%
		R	%
Total		R	%

### Bank details of the investor

Please supply proof of bank details (a cancelled cheque or relevant bank statement or a letter on a bank letterhead with bank stamp not older than 3 (three) months). The bank account must be in the name of the investor. Please note that no third party payments will be accepted. Name of bank: Branch code: Branch name: Account name: Country: Account no.: Savings Type of account: Current All payments will be made electronically into the current or savings account of the registered investor only. 4. Change of phase-in This change can apply to all FNB products. Please only complete this section if you are changing your phase-in instruction. ☐ Cancel phase-in instruction Change phase-in instruction (complete details below, this automatically cancels the existing phase-in instructions) If you require a phase-in, please specify the immediate investment percentage \_\_\_\_\_\_\_\_\_ %, the balance to be phased-in over \_\_\_\_\_\_ months (between 3 and 24). Investment portfolio

Instrument name	Percentage %
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
Total	100%

Please note that Personal Share Portfolio's are not available for phase-in instructions.

#### 5. Declaration by investor

- 1. I warrant that all information provided by me in this form and all other applicable documents to this instruction are true and correct in
- 2. I have read, understood and agree to be bound by the relevant and latest Terms and Conditions available on www.ashburtoninvestments.com or from the Client Service Team on 0860 274 287.
- 3. I agree that where I have a financial advisor, that he/she shall have access to my information which is available on www.ashburtoninvestments.com.

Signed at	Date:	Υ	Υ	Υ	Υ	M	M	D	D
Signature of investor (or duly authorised person(s) where applicable):									
Signature of person acting on behalf of investor (if applicable):									
Capacity of person acting on behalf of investor:									