



INVESTMENT FORM “B-1”

Date: _____

1. Investor's Details

[illegible]

2. Investment Details

Name of the Fund / Investment Plan			Unit Type	Amount in Figures (Rs)	Amount in words	
Sales Load Charged %		Sales Load Waived %			Investor's Signature	

3. Payment Details

Payment Mode <input type="checkbox"/> Cheque <input type="checkbox"/> Pay Order <input type="checkbox"/> Online Transfer <input type="checkbox"/> RTGS			
Cheque No./ Pay Order No./ Online Tranfer		Bank Name	Branch
<input type="text"/>		<input type="text"/>	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/>
For Account Title Please Refer Back side Page.			

4. Declaration and Signature

1. I/ We confirm that I/We have carefully read, understand and agree to abide by all the rules, regulations, relevant Trust Deed (including Supplemental(s)), Offering Documents (including Supplemental (s)), guidelines (on this form) that govern this transactions, terms and conditions given in the form / constitutive documents, Fund Manager Report along with details of Sales Load to be deducted (if any) including taxes.
2. I/We also confirm having the knowledge of applicable load percentages.
3. I/ We understand that all investments in mutual funds are subjected to market risk and the price of the Fund's units may go down resulting in loss of principal amount.
4. I/ We understand that the offer price of the Fund's units include Sales load and is higher than NAV price of the Units.
5. I/ We understand that Alfalah Investments has the sole discretion to allocate/ not to allocate Units of the Fund.
6. I/We confirm that Alfalah Investments facilitator/ distributor has explained the features and risk of the product and I/we have understood these features and risks in which I/we have agreed to invest.
7. I/We agree that I/we shall assume sole responsibility for determining the merits or suitability of any and all advice and /or recommendations of Alfalah Investments before relying on the same to enter into any transaction. I/We will not hold Alfalah Investments responsible for any loss which may occur as a result of my/our decision.
8. I/ we understand that this Fund Risk Categorization will help me/us assess my/our risk appetite. I am/ we are aware that my/our financial needs may change over time depending on my/our personal and situation objectives. I/ we shall be solely responsible for all of my/our current and future investment transactions.
9. I/ we confirm that I am/ we are investing in Fund and the risk level of this fund is mentioned in section 5, 8 and 9. I/ we confirm that I/ we will not hold Alfalah Investments responsible for any loss which may occur as a result of my decision. I/ we further agree that Alfalah Investments facilitator/ distributor has advised us to select a specific fund category as per my/ our risk profile. However, I/ we reserve the discretion to invest in any other fund category.
10. I/We, the undersigned hereby assured to Alfalah Investments that the proceeds invested are not derived from money laundering or illegal activities and the source(s) of funds declared in this Form is true and correct to the of my/ our knowledge and believe.
11. I/We acknowledge that I/We have read the Key Fact Statement at the time of investment, and I/We have read and understood the terms and conditions to the best of my/our knowledge and have retained a copy of the same.

5. Fund as per Category (Annexure)

I/ we confirm that I am/ we are investing in Fund and the risk level of this fund is mentioned in Annexure A, which contains the List of Funds and their corresponding Risk Profiles, to assist me/us in selecting funds that align with my/our risk scoring criteria

Institutional Investor	Individual Investor	Attestation of Branch Manager and Witnesses shall be required only in case of Investor with unstable signature or thumb impression	
Company Stamp	Principal Applicant's Signature / Left Hand Thumb Impression	Attestation of Branch Manager	Witnesses (Adult Male Persons only)
			Name:_____
			CNIC:_____
			Signature:_____
			Name:_____
			CNIC:_____
			Signature:_____

Authorized Signature / Joint Holder(s)	Signature(s)
(a) Name:	
(b) Name:	
(c) Name:	
(d) Name:	

6. Monthly Income Profit

- 100% profit ☐
- Systematic Withdrawal of Rs. _____ (fixed amount)
(In case of fixed amount withdrawal, principle amount may be diminished)

7. Source(s) of Investments

Source(s) of Investments (the principal unit holder or on whom dependent upon)
(select atleast one / more than one if applicable)

<input type="radio"/> Salary	<input type="radio"/> Business Income	<input type="radio"/> Foreign Remittance(s)	<input type="radio"/> Stocks / Investments / liquid asset as per tax return	
<input type="radio"/> Gift	<input type="radio"/> Inheritance	<input type="radio"/> Sale of property	<input type="radio"/> Agriculture	<input type="radio"/> Other

8. Investment Facilitator / Distributor Details (For Office Use Only)

Distributor / Facilitator Name		Code						Distributor's Stamp with date and time
Branch Name		City						

9. Registrar Details (For Office Use Only)

Date and Time Stamping	Form received by	Name and Signature
	Date, Form and attachments verified by	Name and Signature
	Data input by	Name and Signature

Alfalah Asset Management Limited
WE DO NOT ACCEPT CASH OR BLANK/BEARER CHEQUE

We would like to inform all our investors that the Management Company has a policy not to accept cash or blank/bearer cheques for investments in mutual funds managed by it. Investors are advised to prepare their payment instruments (crossed payees account cheque, pay-order or demand drafts) in favour of Trustee of respective mutual fund. Investors are also advised not to give cash to any person on behalf of mutual funds and always used plain Investment Form without any cutting or marking on it.