

UNIT HOLDER RECORD MAINTENANCE FORM

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MIMMB 'S RECORD																											
UNIT HOLDER'S NAME																											
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AUTHORITY TO OPERATE ACCOUNT										
JOINT ACCOUNT PRINCIPAL HOLDER TO SIGN EITHER C *For Joint Account, both holders must sign for request to change the Authority To Operate Account	ONE TO SIGN BOTH TO SIGN									
INCOME DISTRIBUTION OPTION (Please provide bank account details if you opt for payout)										
ALL FUNDS										
FUND NAME / FUND CODE										
	REINVEST PAYOUT									
	REINVEST PAYOUT									
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	REINVEST PAYOUT									
BANK ACCOUNT DETAILS (For Redemption, Income Distribution Payout and Oth	her Payment Purposes)									
Bank Name										
Bank Account Name(s)										
Bank Account No.										
NOMINEE FOR INSURANCE (If Free Insuranceis provided). Only principal holder can request for or	change of the Nominee.									
INSURANCE COMPANY										
NAME PAGE (Alcord)	TE OF DIDTU									
	ITE OF BIRTH (dd/mm/yyyy)									
NRIC (Old) / PASSPORT NO. RELATIONSHIP TO PRINCIPAL HOLDER										
Note: Please provide a photocopy of NRIC / Passport / Birth Certificate of the nominee										
SIGNATURE(S) (Similar in MIMMB's record)										
I hereby request that the above be amended / changed with immediate effect.										
Circulum of Discipal Holder / Date	O'contrary of Initial Halder (Parts									
Signature of Principal Holder / Date	Signature of Joint Holder / Date									
FOR OFFICE USE ON										
Submitted by Walk-in Unit Holder	Remarks :									
Principal Holder Joint Holder Both Holders										
Witnessed by MIMMB staff										
(Name, signature of staff and branch stamp)										
UT Adviser (Name, Code and Contact No.)	Verified by / Date :									
Remarks:										

Manulife Investment Management (M) Berhad 200801033087 (834424-U)

13th Floor, Menara Manulife, 6, Jalan Gelenggang, Damansara Heights, 50490 Kuala Lumpur. Tel: 03-2719 9271 Fax: (603) 2093 7377

 ${\bf Email: MY_CustomerService@manulife.com } \qquad {\bf www.manulifeinvestment.com.my}$