



SECURITIES INVESTMENT PLAN

TRANSFER FORM

(To be completed when transferring securities held under a Securities Investment Plan account to another investor who has or will open a Securities Investment Plan account.)

VERSION 8.1

IMPORTANT INFORMATION

- 1. Please send this form and all associated documents directly to the Administrator (by email only) to the following email address instructions@itransact.co.za
- 2. Automated Outsourcing Services (Pty) Ltd, trading as Itransact is an authorised Financial Services Provider (FSP 650) and is the Administrator of this product.
- 3. The responsibility of transmitting the documents to the Administrator lies with the sender.
- 4. No form will be considered complete without all the required fields being completed and the required supporting documentation being submitted. The Administrator reserves the right to reject any application and or instruction at any time due to incomplete or insufficient documentation and information.
- 5. It is important that you have read and understood all the latest product media, terms and conditions associated to this product before you sign this form, all of which are available from the Administrator whose details are provided at the end of this form.

SECTION 1: INVESTOR DETAILS

Investor Number									
First Name or Trading Name (If a legal entity)									
Surname									
		_				 			

If any of your contact details have changed since your initial investment, please provide updated details in the spaces below.

Cell Phone Number									
Other Contact Number									
Email Address		 							

SECTION 2: TRANSFER DETAILS

Select either amount or percentage

I/We hereby request the Administrator to transfer securities from my/our account as follows:

TRANSFER 01

FROM

Portfolio Number	Security Name	Amount	%
		R	%
то			
Portfolio Number	Investor Number		



TRANSFER 02

FROM

Portfolio Number	Security Name	Amount	%
		R	%
то			
Portfolio Number	Investor Number		
TRANSFER 03			
FROM			
Portfolio Number	Security Name	Amount	%
		R	%
то			
Portfolio Number	Investor Number		
TRANSFER 04			
FROM			
Portfolio Number	Security Name	Amount	%
		R	%
то			
Portfolio Number	Investor Number		

Please note that:

- If the investor to whom securities are being transferred does not have an existing client/portfolio number under the Securities Investment Plan, then a Securities Investment Plan New Business Application Form, completed by that investor, is required in addition to this transfer form.
- There is a 40 day holding period on all securities bought by debit order.

SECTION 4: INVESTOR DECLARATION

- 1. The latest terms and conditions associated to this product are applicable. The Investor is responsible for ensuring that he/ she/it has read and understood them. A copy of these terms and conditions may be requested from the administrator.
- 2. The Investor confirms that all statements made and information provided on this form are correct.

Signature of Investor or duly authorised person/s for minor investors				Date (ddmmyyyy)								
Print Initials and Surname												



	Date (ddmmyyyy)							
Signature of third party applicant or authorised represe legal body (if applicable)								
Print Initials and Surname								
SECTION 5: FINANCIAL SERVICES PRO	VIDER DECLARATION (IF APPLICABLE)							
that he/she/it has read and understood them and may be requested from the administrator.	product are applicable. The Financial Service Provider is responsible for ensuring d explained them to the investor in full. A copy of these terms and conditions atements made and information provided on this form are correct.							
	Date (ddmmyyyy)							
Signature of Authorised Financial Service Provider/Rep	presentative							
Print Initials and Surname								
SECTION 6: FINANCIAL SERVICES PRO	VIDER DETAILS (IF APPLICABLE)							
Financial Service Provider Details								
Name of Financial Services Provider (The Company)								
Cell Phone Number								
Other Contact Number								
Email Address								
Tick the box if the details below are the same as the FSP details above								
Name of Financial Advisor/Representative								
Cell Phone Number								
Other Contact Number								
Email Address								



SECTION 7: ADMINISTRATOR CONTACT DETAILS

Financial Advisor Support Centre

Telephone 086 143 2383 | Fax 086 743 6959 | Email info@itransact.co.za

Investor Support Centre

Telephone 086 146 8383 | Fax 086 743 6959 | Email investor@itransact.co.za

www.itransact.co.za