

DECLARATION & AUTHORIZATION

I / WE HEREBY ACKNOWLEDGE OF HAVING READ AND UNDERSTOOD THE RELEVANT TRUST DEED AND OFFERING DOCUMENT THAT GOVERN THIS TRANSACTION AND FURTHER ACKNOWLEDGE UNDERSTANDING OF THE RISKS INVOLVED.

NOTE: INSTITUTIONAL CLIENT PLEASE AFFIX COMPANY STAMP.

NAME(S): (1) _____ (2) _____ (3) _____ (4) _____

AUTHORIZED SIGNATURE(S) (1) _____ (2) _____ (3) _____ (4) _____

TO BE FILLED IN BY THE APPLICANT'S BANKER IN CASE THE APPLICANT IS UNABLE TO SIGN THE FORM

I, _____ MANAGER OF _____
(THE "BANK") CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE DECLARATION OF OR ON BEHALF OF THE APPLICANT GIVEN IN THIS FORM IS CORRECT.

MANAGER'S SIGNATURE / BANK STAMP

FOR OFFICIAL USE ONLY**FOR DISTRIBUTOR / SALES REPRESENTATIVE USE**

AUTHORIZED SIGNATURE

DISTRIBUTOR CODE	FORM RECEIVED ON	DATA & ATTACHMENTS VERIFIED
		<input type="checkbox"/> Yes <input type="checkbox"/> No

FOR FACILITATOR USE

AUTHORIZED SIGNATURE

FACILITATOR CODE	FORM RECEIVED ON	REMARKS / INSTRUCTIONS

FOR REGISTRAR USE

AUTHORIZED SIGNATURE

FORM RECEIVED ON	DATA INPUT DATE	DATA & ATTACHMENTS VERIFIED
		<input type="checkbox"/> Yes <input type="checkbox"/> No

REMARKS

* Registration No. will be system generated.

** Please attach copy of Computerized National Identity Card (CNIC) / Passport. Pakistani National are required to submit copy of CNIC whereas Foreign Nationals are required to submit a copy of Passport duly certified.

*** Subject to the requirement of obtaining succession / death certificate, as applicable, at the discretion of the Management Company.

Note :

- The unit holder should either mark all empty spaces in the form "Void" or cross (X) out.
- All correspondences will be addressed to Authorised Signatory (1) only.
- Copy of Memorandum & Articles of Association or Certificate of Incorporation by whatever name called, should ideally be certified by the pertinent government agency in the country of incorporation.

APPLICATION CHECKLIST**FOR INDIVIDUALS CLIENTS:**

COPY OF CNIC(S) / PASSPORT ZAKAT AFFIDAVIT(S)

FOR INSTITUTIONS CLIENTS:

COPY OF CNIC(S) OF SIGNATORIES MEMBERSHIP CERTIFICATE IN CASE OF SOLE PROPRIETOR
 LIST OF DIRECTORS & OFFICERS PARTNERSHIP DEED ALONGWITH ITS CERTIFICATE OF REGISTRATION
 DOCUMENTARY EVIDENCE FOR TAX EXEMPTION POWER OF ATTORNEY(S) - NOTARIZED AND ON STAMP PAPER
 CERTIFICATE OF INCORPORATION / REGISTRATION / COMMENCEMENT OF BUSINESS MEMORANDUM & ARTICLES OF ASSOCIATION / BY LAWS / TRUST DEED
 COPY OF BOARD RESOLUTION (AUTHORISING INVESTMENTS) TAX EXEMPTION CERTIFICATE / OTHERS (SPECIFY) _____

PROVISIONAL RECEIPT (ALFALAH GHP ISLAMIC FUND)

(FORM AGIF - 01)

RECEIVED FROM:			STAMP / RECEIPT DATE & TIME
CHEQUE / DD / P.O. No.	DATED:	Rs.	
RUPEES IN WORDS:			
DRAWN ON BANK:	BRANCH:		AUTHORIZED SIGNATURE