

## UITF Fund Order Form

New     Top-up     Redeem  
 ADA Updating: \_\_\_\_\_  ADA Cancellation: \_\_\_\_\_

Transaction Date: \_\_\_\_\_

<b>PART I – CUSTOMER/PAYOR/CLIENT INFORMATION</b>
Customer/Payor/Client Full Name: _____
Customer/Payor/Client Contact Details: _____
Customer/Payor/Client Email Address: _____
Client Settlement Account Number: _____

PART II – SUBSCRIPTION/REDEMPTION DETAILS				
Fund Name	Trust Account Number	<input type="radio"/> Subscription Amount (Php)	REDEMPTION	
			<input type="checkbox"/> Partial <input type="radio"/> Redemption (in Units)	<input type="checkbox"/> Full <input type="radio"/> Redemption Amount (Php)

PART III – AUTHORIZATION FOR AUTO-DEBIT ARRANGEMENT ENROLLMENT FORM (For Payday Money Market Fund Only)				
Billers/Merchant: Robinsons Bank Corporation - Trust and Investment Group				
Account Type: <input type="checkbox"/> Individual <input type="checkbox"/> Joint <input type="checkbox"/> Corporate (For Corporate Payors Only: <input type="checkbox"/> with CWT)				
Customer/Payor/Client Account Number to be Debited	Amount (Php)	Start Date	Frequency of ADA	
			<input type="checkbox"/> Every 15 <sup>th</sup>	<input type="checkbox"/> Every 30 <sup>th</sup>

**Terms and Conditions**

**For Payday Money Market Fund participants:**

- We understand that there is volatility in the market, and that subsequent orders for Auto- Debit Arrangement (ADA) will be made regardless of the movements in the price for the particular date as scheduled.
- The subsequent order will be debited from the designated settlement account at the beginning of the day, in accordance with the schedule. If the schedule falls on a non-banking day, order will be processed on the next banking day.
- Subsequent orders shall be debited subject to the availability of the sufficient balance in the settlement account. If balance of the account is insufficient, the corresponding transaction shall be cancelled for the relevant date. The bank is not liable for the cancelled transaction due to insufficient funds in the settlement account.
- The bank reserves the right to discontinue the ADA arrangement as it deems necessary, if it is no longer viable or aligned with its business strategy.

**For all Fund Participants:**

- Orders will be processed only when sufficient balance is available in the settlement account.
- Orders received after the cut-off time will be processed the next banking day/ based on the applicable NAVPU price for that day
- For joint "or" accounts, all transactions made by any of us are done with the consent of my/our co-investor/s..
- The actual number of units subscribe or net settlement amount can only be computed upon the availability of the applicable Net Asset Value Per Unit (NAVPU) of the Fund to be reflected in the COI of the UITFs.
- Electronic copy of the Confirmation of Investment (COI) shall be issued up to two (2) banking days from the date of investment.
- Issuance of COP may be provided upon request.

I/We hereby voluntarily and willingly agree to comply with any and all laws, regulations, and the plan rules terms and conditions governing my/our investment in the indicated Unit Investment Trust Fund. In case of instruction of full withdrawal/ termination, the trustor/participant hereby releases, discharges, quitclaims now and forever Robinsons Bank-Trust and Investment Group its assigns successors-in-interest, administrators, stockholders, officer and employees from any and all claims, liabilities, damages or causes of action, arising out of in connection with or otherwise related to the termination of the Trustors account. The bank reserves the right to amend the provisions in the terms and conditions of the prospectus / Declaration of Trust / Participating Trust Agreement / Plan rules as it may deem necessary. Amendments shall be binding effective on the date as advised by the Bank.

By affixing my signature in this UITF Fund Order Form, I acknowledge that I have read, understood and agree to be bound by the Terms and Conditions above.

		
_____ Client Signature over Printed Name	_____ Client Signature over Printed Name	_____ Client Signature over Printed Name

THE UITF IS A TRUST PRODUCT AND NOT A DEPOSIT ACCOUNT OR AN OBLIGATION OF OR GUARANTEED OR INSURED BY THE TRUST ENTITY OR ITS AFFILIATES OR SUBSIDIARIES. THE UITF IS NOT INSURED OR GOVERNED BY THE PDIC. DUE TO THE NATURE OF THE INVESTMENT, YIELDS AND POTENTIAL YIELDS CANNOT BE GUARANTEED. ANY LOSS/INCOME ARISING FROM MARKET FLUCTUATIONS AND PRICE VOLATILITY OF THE SECURITIES HELD BY THE UITF, EVEN IF INVESTED IN GOVERNMENT SECURITIES, IS FOR THE ACCOUNT OF THE CLIENT/PARTICIPANT. AS SUCH, THE UNITS OF PARTICIPATION OF THE UITF INVESTOR, WHEN REDEEMED, MAY BE WORTH MORE OR BE WORTH LESS THAN HIS INITIAL INVESTMENT/CONTRIBUTION. HISTORICAL PERFORMANCE, WHEN PRESENTED, IS PURELY FOR REFERENCE PURPOSES AND IS NOT A GUARANTEE OF SIMILAR FUTURE RESULT. THE TRUSTEE IS NOT LIABLE FOR LOSSES UNLESS UPON WILLFUL DEFAULT, BAD FAITH OR GROSS NEGLIGENCE.

For BANK'S USE ONLY	
Date: _____	
<b>Referral Channel</b> <input type="checkbox"/> Retail Banking Segment, Referring Branch: _____ <input type="checkbox"/> Employee Name and Employee Number: _____ <input type="checkbox"/> Transaction Banking Group <input type="checkbox"/> Others	Trust and Investment Group CIF: _____ PTA: _____ <b>Payor Reference/Account Number:</b> RBANK PAYDAY MONEY MARKET FUND      1000-30-10001-8734 RBANK EQUITY INDEX FUND                      1000-30-10001-8741 RBANK EQUITY OPPORTUNITY FUND            1000-30-10001-8758 RBANK MONEY MARKET FUND                1000-30-10000-1183 RBANK BALANCED FUND                        1000-30-10000-1174 RBANK TAX-EXEMPT RETIREMENT FUND      1000-30-10001-2008
<b>Branch</b> Signature Verified By/Date: _____ Signature Over Printed Name _____	<b>Transaction Banking Group (for New Accounts/Updating/Cancellation only)</b> Processed By/Date: _____ Approved By/Date: _____  Signature Over Printed Name _____ Signature Over Printed Name _____