

REQUEST FOR REDEMPTION LYNX

REQUEST FOR REDEMPTION LINA	ı				
☐ Total holding (100%)		Amount in SEK		Number of units	
*First name			*Account No. (Entity ID)/Personal ID No./Company reg. No.		
*Last name/Complete company name					
Email address					
*Country (domicile for tax purposes)	*City/town of birth		*Country of birth		
*Telephone, daytime (incl. country and area codes)	Fax (incl. country and area codes)		*Taxpayer Identification Number (TIN)		
*Bank/BIC		*IBAN/Account number			
*Owner of the account					
*Required information					
The request for redemption must be received redemption date. The redemption date is the	•	` ,	ited ("SS&C") n	o later than two business days before the	
For redemptions requests not sent via SWIFT, th junction with the payment of the redemption am		to confirm and verify the au	athenticity of the re	quest. A contract note will be issued in con-	
I am/We are aware that Lynx Asset Management Advice to Consumers or such investment advises not engaged the company to provide any such interest.	referred to in the Act (20				

SS&C is hereby authorised to verify that I am/we are the holders of the above bank account and I/we hereby authorise the above bank, to SS&C, to confirm such circumstance and I/we also give SS&C permission to send a copy of this redemption form to the bank.

I am/We are aware of the fact that redemption proceeds will only be made to an altered bank account if I am/we are the holders of the account.

Send the form to: email: LynxISTrading.IR@sscinc.com.

Note!

PLEASE USE CAPITAL LETTERS!

For **entities** a current certificate of incorporation/registration or equivalent and a certified copy of good quality of a passport, national identity card or ID issued by a Government body showing the photograph and signature of an authorized signatory must be enclosed.

For **individuals** a certified copy of good quality of a passport, national identity card or ID issued by a Government body showing the photograph and signature must be enclosed.

Individuals who wish to receive the payment in another bank account must enclose an account statement from the bank confirming that the unitholder is the owner of the account, as well as two utility bills confirming the unitholder's address. The copies must be certified. The change will be made when we have verified the new account.

City/town, date	•••••	•••••	
Signature, (authorised signatory)			
Clarification of signature			