

Transfer order form for individual investors



Recipient

Caceis Investor Services Bank S.A.
Transfer Team
Tel. +352 26 05 55 26
Fax +352 24 60 95 00

Sender

Sender name * _____
Contact person _____
Tel. * _____
Fax _____
Email * _____

Date: 2 May 2024

Please write clearly in **BLOCK CAPITALS**

OUT

Client Account number *
(CACEIS Identifier)

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Dealer | 7 digits account number

Registered Account name *

ISIN Code *	Number of Shares *												
<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>												_____ / _____ / _____ <small>Whole</small>	• _____ <small>Decimals (3)</small>
		Shares											

Please tick if you want to transfer all shares

Decimal Convention: The decimal separator is represented by a dot (.) and the thousand separator by a comma (,)

IN

Client Account number *
(RBC Identifier)

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Dealer | 7 digits account number

Registered Account name *

The Key Investor Information Document is available on the website of the Fund for every share-class (<https://www.vector.lu/en/documents/>). By checking this box, I certify that I (Account holder IN) have read the relevant KIID of the Fund of the share-class with ISIN-code indicated above. I agree that this subscription order will be considered as a written confirmation that I have read the KIID on the date the subscription order was placed.

Account holder OUT
Name *

Account holder IN
Name *

Signature *

Signature *

NOTICE: This communication may contain information which is confidential and/or legally privileged and is intended only for the addressee named above. If you are not the named addressee, this communication has been sent to you in error and you are asked not to read, use or disclose it. We should be grateful if you would contact us immediately so that we can arrange for its return. Thank you.
(*) Mandatory Fields