

CAPITAL BREEDER UNITS SALE REQUEST



CAPITAL BREEDER

1. INVESTOR INFORMATION

Natural person Legal entity Craftsmanship
 Resident non-resident

First name and last name: _____ Name of legal entity / craftsmanship: _____
OIB (Personal Identification Number): _____

PLACE OF RESIDENCE

Street name and number: _____ Town/city: _____ Postal code: _____
Telephone number: _____ Fax number: _____ E-mail: _____
Name of the bank: _____

Giro account / business account IBAN (International Banking Account Number): _____

Current account IBAN: _____

Date of account opening: _____

Name of the bank: _____ Business sector (for legal entities and craftsmanship): _____

For legal entities and craftsmanships – President of the management board/ Director's name: _____

CORRESPONDENCE ADDRESS (FILL ONLY IF DIFFERENT THAN ABOVE)

Street name and number: _____ Town / city: _____
E-mail: _____ Postal number: _____

2. UNITS SALE

Number of units: or financial amount (EUR):

3. METHOD OF PAYMENT

to the account mentioned above
 transfer units into OIF USA Blue Chip, managed by Global Invest d.o.o.

Fund's Giro account IBAN is: HR4024840081300166289

The provisions set out in the Fund's Prospectus and Rules apply to the pay out.

In case of unit transfer, the units purchase request in selected fund must be filled out.

Signature: _____ Place and date: _____

In addition to the signed units sale request, please provide a copy of your ID and a copy of the bank card of the account to which the funds will be paid out by fax or by e-mail. We recommend that you make sure that we have received this documentation by calling us on a toll-free telephone number 0800 20 00 40

4. REQUEST RECEIPT (OIF CAPITAL BREEDER)

Date and time of receipt: _____ Stamp and signature: _____