

# Switch and/or Redirection Form

#### Who is this form for?

This form is for the policyholders of Compass Regular Saving Policies that wish to change one or more of the funds to which the value of their policy is linked.

#### Completing this form

- By completing this form you will be requesting a change to the funds to which the value of your policy is linked.
- · Please return this form to: trading@providence.life
- We can only accept original written instructions that have been signed by all policyholders, trustees or authorised signatories. If you are
  the appointed investment adviser for the policy, you alone may sign on their behalf.
- · If you hold more than one (1) policy, you must complete a separate form for each policy.

#### Important notes

Processing switches

We will process your instruction to switch on the day on which we receive it, subject to:

- · Your instruction being received by 3pm (Mauritius time);
- · Our offices being open for work on that day;
- · All necessary documentation being supplied;
- Compliance with your policy terms and conditions.

If, for whatever reason and further to the above criteria, we are unable to process your instruction on the day on which we receive it, we will process it on our first working day thereafter.

#### General

Where the provider of a fund linked to your policy becomes insolvent, your policy will incur the loss. We are not authorised to provide you with Investment advice, and we would always recommend that you consult your introducer before making investment decisions.

## Section 1. Policy Details

Policy number

		First Poli	cyholder			Second Po	olicyholder	
Title	Mr	Mrs	Miss	Ms	Mr	Mrs	Miss	Ms
	Other				Other			
Surname (as shown on ID / passport)								

Section 1. Policy Deta	ails (continued)			
Address				
(please ensure this matche of address provided)	s with the proof			
Telephone number (Include international count	ry code)			
Mobile number (Include international count				
Email address				
Section 2. Instruction	าร			
Switch from:				
ISIN/PR code		Fund name	Asset currency	Investment percentage

## Switch into:

ISIN/PR code	Fund name	Asset currency	Investment percentage
	(Please ensure your investments total 100%)		

## Redirect Future Payments:

ISIN/PR code	Fund name	Asset currency	Investment percentage
	(Please ensure your investments total 100%)		100%

## Section 2. Instructions (continued)

Before signing please read the notes on page 1 and confirm that you have done so by ticking here.					
	First Policyholder / Trustee / Authorised Signatory	Second Policyholder / Trustee / Authorised Signatory			
Signature					
Date (DD/MM/YYYY)	1 1	/ /			
	Third Trustee / Authorised Signatory	Fourth Trustee / Authorised Signatory			
Signature					
Date (DD/MM/YYYY)	/ /	/ /			
Name of introducer					
Company of introducer					
	Introducer				
Signature					
Date (DD/MM/YYYY)	1 1				

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