

## SETTLEMENT INSTRUCTION FOR DAILY SUBSCRIPTION / REDEMPTION OF INVESTMENT FUND UNITS

Name of Account Holder submitting the instruction		
Type of instruction	☐ New instruction  Transaction ID:	
Details of new transaction:		
Type of instruction	□ DVP	□ FOP
Transaction type:	Subscription (SUBS)	Redemption (REDM)
Status of instruction	☐ Hold	Released
Side of instruction	☐ Deliverer	Receiver
Intended date of settlement	(year, month, day)	
Securities account No. of Account Holder submitting the instruction		
* Client of Account Holder submitting the instruction (BIC or LEI or Name)		
* Client of counterparty (BIC or LEI or Name)		
Matching BIC/account No. of counterparty	/	
** Account holder's cash account No. (IBAN format)	/	
ISIN	HU00007	
Volume of securities (pcs)		
** Settlement amount and currency		
** Settlement amount written out		
* Optional data ** Mandatory only for DVP		
Dated:		



The signature of the Account Holder reported to KELER Ltd.

For information on the submission of the instruction, please read the information on page 2. To be filled in by KELER Zrt.:

Client eligibility checked	
Cancellation executed	
Manual instruction recorded	

## INFORMATION ON THE SUBMISSION OF THE INSTRUCTION

The instruction shall be valid if signed by the signatories of the Account Holder reported to KELER Ltd.

The instruction may be submitted:

- By the submission of its original to the Account Management Department of KELER Ltd: 1074 Budapest, Rákóczi út 70-72. (in person or in mail)
- By the sending of the signed and scanned document attached to an encrypted e-mail to the e-mail address <a href="mailto:szamlavezetes@keler.hu">szamlavezetes@keler.hu</a>.
  - If the encrypted TLS communication channel has been established between the Account Holder and KELER, the form may be sent in a simple attachment to an original mail.
  - If there is no TLS encryption in place between the Account Holder and KELER, the scanned form shall be compressed in password-protected zip format and sent in attachment. The password required to open the zip file shall be sent to the mobile number +36 30 822 5465.

Please write the e-mail address of the sender in the SMS!

E.g.: sender:name@companyname.hu, password: xxxxxxxxxx