REDEMPTION



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1 Investor details

Please use this form if you wish to redeem (sell) directly owned fund units in funds managed by Origo Fonder AB. For detailed information on the rules and procedures for redemptions, see the funds' information brochure.

Name	Personal ID no. / Company reg. no.
Telephone no.	E-mail address

2 Redemption

Please state which funds and share classes you wish to redeem, and to what extent.

Fund	Share class	Units / percentage share / amount in SEK
	А	
ORIGO SELEQT	В	
	С	
ORIGO QUEST	А	Delayed (no fee) [*]
		Next possible (1% fee) [*]
	В	Delayed (no fee) [*]
		Next possible (1% fee) [*]
	С	

* For ORIGO QUEST share classes A and B, a redemption fee of 1% is charged if redemption is requested to the **next possible** trading day (usually once a week). For **delayed** redemption (recommended), no fee is charged and the redemption request is executed on the trading day that falls at least 20 banking days after this notification is received by the AIF manager. No redemption fee is charged for other funds and share classes.

3 Bank details

Make the payment to my registered bank account		
Make the payment to the following bank account (must be held in the investor's name):		
Bank	IBAN (or equivalent bank account number details)	





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4 Signature

By signing below, I confirm that: (a) the above stated information is correct; (b) I have studied, understood and accepted the relevant funds' redemption rules (see www.origofonder.se); and (f) my request is not based on any financial advice given by Origo Fonder AB. This from must be signed by the investor or its representative(s). If the investor is underage or under guardianship, the form must be signed by all parents or guardians.

Signature	Place and date
Name	

5 Send to

Send the completed and signed form, together with the attachments specified below, per email (scanned originals) to support@origofonder.se.

ATTACHMENTS

If you provide a new bank account: Certified copy of passports for each representative.

For entities: Registration certificate not older than six months, and certified copies of passports for Ũ each representative. Relevant power of attorney must be provided if the right to represent the entity is not clear from the registration certificate.

For identification, we accept international passport, Swedish driving license, ID card issued by a Swed-R= ish authority and Swedish certified ID card. The copy provided must be certified by at least one other person, meaning that someone other than the subject of the ID document certifies that the copy is in fact a true and accurate copy of the original, by providing his or her signature, name, personal ID no. and phone number. Feel free to use the template on page 3.



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IDENTIFICATION

Feel free to use this template when copying and certifying your identification documentation. If multiple ID documents are to be provided, please copy and certify them individually.

Copy your valid passport or other ID in the box below. We accept international passport, Swedish driving license, ID card issued by a Swedish authority and Swedish certified ID card.

CERTIFICATION

The copy shall be certified by at least one other person. By certifying the copy, it is confirmed that the copy is a true and accurate copy of the original document.

Signature	Name
Personal ID no.	E-mail address or Telephone no.

