

DEBIT ORDER INSTRUCTION

Life And Retirement Fund Products - Existing Clients

Coronation Life Assurance Company Limited | SARS Registration Number: 1999/005510/06
Coronation Retirement Annuity Fund | FSB Registration Number: 12/8/37654/R | SARS Registration Number: 18/20/4/041867

- All sections must be completed in full using BLOCK LETTERS.
- Indicate all options selected by means of a cross [X].
- Initial any amendments made to the application form.
- Ensure that all information provided is accurate.
- No instruction will be processed unless all requirements have been met.
- The daily cut-off for receipt of instructions is 14h00.
- Only 1 investment per form is allowed.
- Forward your instruction to (021) 680 2250 or eflows@coronation.co.za.
- Should you have any queries regarding this application, please contact the Coronation Client Service Centre on 0800 22 11 77.

A INVESTOR DETAILS

Surname/Company/Trust/Partnership/Close Corporation: _____
First name(s)/Contact Name: _____ Title: _____
Unitholder number: 104104 _____ Policy number: Pol _____
ID/Passport number/Company/Trust/Partnership/Close Corporation registration number: _____
Contact telephone number: (_____) _____ Fax number: (_____) _____
Cellphone number: (_____) _____
E-mail address: _____

B DEBIT ORDER DETAILS

Coronation Endowment Plan Coronation Retirement Annuity Fund

Debit Order Increase

Please increase my debit order as follows:

From: RANDS _____, CENTS _____ to: RANDS _____, CENTS _____

Effective: _____ Collection Date: 1st 4th 7th 10th 15th 28th Investment options to remain as is*

Debit Order Decrease

Please decrease my debit order as follows:

From: RANDS _____, CENTS _____ to: RANDS _____, CENTS _____

Effective: _____ Collection Date: 1st 4th 7th 10th 15th 28th Investment options to remain as is*

Debit Order Termination

Please terminate my debit order of: RANDS _____, CENTS _____

Effective: _____

Debit Order Reinstatement

Please reinstate my debit order of: RANDS _____, CENTS _____

Effective: _____ Collection Date: 1st 4th 7th 10th 15th 28th Investment options to remain as is*

* Please indicate fund selection in Section D - Investment Options if different to existing fund selection.

C BANKING DETAILS

The details specified below must be in the investor's name and will be used for all future banking transactions until such time as we are notified in writing of any changes.

Bank: _____ Account number: _____

E INVESTOR DECLARATION

I hereby acknowledge that the same terms and conditions that are applicable to my original investment apply to this investment.

Signature of investor or authorised representative*: _____ Date: ____ / ____ / ____

** Please forward proof of authorisation.*