

# Fund Transaction Form

## 1. AccountHolderDetails

Account Holder Name: \_\_\_\_\_

Account number: \_\_\_\_\_

Legal residence / registered address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Fax: \_\_\_\_\_

## 2. Subscription

Investment amount to be remitted to SEB A.B.

ISO Code/Currency:	IBAN Number for payment:	BIC Code /SWIFT :
SEK	SE6550000000058511114181	ESSESESS

The reference of the payment should always mention the ISIN Code and the name of the investor. To select the funds you want to invest in, please refer to the current prospectus.

ISIN Code	Fund (sub-fund)	Share or Unit Class Name	Class Currency	Subscription amount or Shares/Units
SE0011204643	Nordic Cross Credit Edge	A	SEK	

\*Details of the minimum investment and if the investment should be made in shares, units or monetary amount are available in the Prospectus.

## 3. Redemption

ISIN Code	Fund (sub-fund)	Share or Unit Class Name	Class Currency	Redemption amount or Shares/Units
SE0011204643	Nordic Cross Credit Edge	A	SEK	

Indicate the payment details for the redemption if they differ from those in your fund account application.

Currency: \_\_\_\_\_ Fund account holder's name: \_\_\_\_\_

IBAN or Account number: \_\_\_\_\_

Reference: \_\_\_\_\_

Name of beneficiary's bank: \_\_\_\_\_ SWIFT or ABA: \_\_\_\_\_

If applicable intermediary bank's name: \_\_\_\_\_

Intermediary bank's SWIFT or ABA: \_\_\_\_\_

#### 4. Switch (if permitted within the constitutive documents of the fund)

Please indicate the fund/class which you would like to convert from:

ISIN Code	Fund (sub-fund)	Share or Unit Class Name	Class Currency	Subscription amount or Shares/Units

Please indicate the fund/class which you would like to convert to:

ISIN Code	Fund (sub-fund)	Share or Unit Class Name	Class Currency

I confirm having received and read and I hereby agree to the Terms and Conditions in the Application form, which shall govern the business relationship with you.

I confirm that for all present and future investments covered by this Application Form I have chosen to contact SEB to carry out the transaction and that this contact is not a result of any advice or personalized approach by SEB to me with the intention to influence me in respect of a specific product or transaction.

Place, date

Signature of Fund Account Holder(s)

1. \_\_\_\_\_

2. \_\_\_\_\_

**Please note:**

Queries can be sent to [register.ta.ops@efa.eu](mailto:register.ta.ops@efa.eu) or addressed via telephone to +352 48 48 80 9001. When you have completed the transaction form, please send it by fax to +352 48 6561 8002.