

# Transfer of fund units of Adrigo Hedge – Form 1

- signed by current unit holder

- Transfer of fund units can only be made every banking day.

- Adrigo Asset Management AB (the Fund Management Company) must receive the transfer notice, both Form 1 and Form 2, at the latest at 2 pm on a banking day. When the Stockholm Stock Exchange closes at 1 pm, transfer notice must be received no later than at 10 am. The Fund Management Company has the right to charge the fund unit holder a fee of a maximum of SEK 1,500.

## Number of fund units for transfer

|   |                  |
|---|------------------|
| Number of fund units, amount in SEK or % of holdings* | Date of transfer |
| Reason for transfer                                   |                  |

\* Entire fund-unit holding = 100%

## Current Unit holder

|                                      |                                |
|--------------------------------------|--------------------------------|
| Family name, first name/Company name | Personal ID No/Corp Reg No     |
| Address                              | Post code/Zip code, City       |
| Contact person/e-mail address        | Country (if other than Sweden) |

## Guardian (if applicable)

|               |   |
|---------------|---|
| Guardian name | Guardian's personal identification number |
| Guardian name | Guardian's personal identification number |

## New Unit Holder

|                                      |   |
|--------------------------------------|---|
| Family name, first name/Company name | Personal ID No/Corp Reg No                        |
| Address                              | Post code/Zip code, City                          |
| Country (if other than Sweden)       | Residence for tax purposes (if other than Sweden) |
| Contact person/e-mail address        | Telephone no                                      |

Please confirm that it is NOT a change in beneficial ownership

Yes

No (Please note that the new Unit Holder has to fill in our normal subscription form, and attach it to Form 2 of the Transfer Form)

.....  
Place

.....  
Date

.....  
Signature, Current Unit Holder

.....  
Printed name

The application shall be sent to Adrigo Asset Management AB, by email to the following address [admin@adrigo.se](mailto:admin@adrigo.se) or by fax to +46 8 505 887 70. All original documents shall be sent by mail to the Adrigo Asset Management AB, Grev Turegatan 14, SE-114 46 Stockholm, Sweden.



**Adrigo Asset Management AB**  
Grev Turegatan 14 • SE-114 46 Stockholm • Sweden  
Tel +46 8 505 887 00 • Fax +46 8 505 887 70  
[www.adrigo.se](http://www.adrigo.se)

Registered office: Stockholm • Reg no 556716-4719  
Regulated by the Swedish Financial Supervisory Authority

# Transfer of fund units of Adrigo Hedge – Form 2

- signed by new unit holder

- Adrigo Asset Management AB (the Fund Management Company) must receive the transfer notice, both Form 1 and Form 2, at the latest at 2 pm on a banking day. When the Stockholm Stock Exchange closes at 1 pm, transfer notice must be received no later than at 10 am.

## Number of fund units to receive

|   |                  |
|---|------------------|
| Number of fund units, amount in SEK or % of holdings* | Date of transfer |
|---|------------------|

\* Entire fund-unit holding = 100%

## Current Unit Holder

|                                      |                            |
|--------------------------------------|----------------------------|
| Family name, first name/Company name | Personal ID No/Corp Reg No |
|--------------------------------------|----------------------------|

## New Unit Holder

|                                      |   |
|--------------------------------------|---|
| Family name, first name/Company name | Personal ID No/Corp Reg No                        |
| Address                              | Post code/Zip code, City                          |
| Country (if other than Sweden)       | Residence for tax purposes (if other than Sweden) |
| Contact person/e-mail address*       | Telephone no                                      |

\*Will receive our monthly letter

- I prefer to download the Annual Report and the Half Year Statement from the website [www.adrigo.se](http://www.adrigo.se)  
 I prefer to receive the Annual Report and the Half Year Statement by mail sent to the address above

## Guardian (if applicable)

|               |   |
|---------------|---|
| Guardian name | Guardian's personal identification number |
| Guardian name | Guardian's personal identification number |

## Bank Account to receive future payments from the Fund

|      |                 |                |
|------|-----------------|----------------|
| Bank | Clearing number | Account number |
|------|-----------------|----------------|

I/we declare that I/we have read, understood and accepted the fund regulations and that the information provided herein is correct. I/we declare to promptly notify Adrigo Asset Management AB of any changes, e.g. moving abroad, changes of addresses, bank accounts etc. If the application concerns a corporate body, certificates of registration and a list of signatories have to be enclosed. If the application concerns a natural person a certified copy of valid identification documentation has to be enclosed.

.....  
Place

.....  
Date

.....  
Signature, New Unit Holder

.....  
Printed name

The application shall be sent to Adrigo Asset Management AB, by email to the following address [admin@adrigo.se](mailto:admin@adrigo.se) or by fax to +46 8 505 887 70. All original documents shall be sent by mail to the Adrigo Asset Management AB, Grev Turegatan 14, SE-114 46 Stockholm, Sweden.



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