MERIDIAN ASSET MANAGEMENT

RESOLUTION REQUEST FORM

Selective Alpha Multi-Asset Special Fund

Meridian Asset Management is licensed and regulated by the Capital Markets Authority (CMA) of Kenya.

1 INVESTOR DETAILS

INVESTOR / ACCOUNT HOLDER FULL NAME

ACCOUNT TYPE

e.g. Individual | Joint | Corporate

EMAIL ADDRESS

MOBILE NUMBER

2 REQUEST DETAILS

Tick the type of resolution or action you are requesting (you may select more than one):

- ☐ Redemption / Partial Withdrawal of Units
- ☐ Additional Subscription / Top-Up
- ☐ Change of Personal or Contact Details
- ☐ Change of Bank / Payment Instructions
- ☐ Update of Beneficiary / Next of Kin
- ☐ Request for Statement or Report
- ☐ Other (please specify in Details below)

DETAILS / JUSTIFICATION (DESCRIBE YOUR REQUEST, INCLUDING AMOUNTS, DATES OR NEW INSTRUCTIONS)

3 DECLARATION & SIGNATURE

I/We, the undersigned, confirm that the information provided in this form is true, complete and accurate. I/We understand that this form is a formal instruction to Meridian Asset Management in respect of my/our holding in the Selective Alpha Multi-Asset Special Fund, and that it will be processed in accordance with the Fund's governing documents and applicable law. I/We acknowledge that the Fund Manager may require further documentation or verification before acting, and that submission of this form does not guarantee that the requested resolution will be approved or implemented. I/We authorise Meridian Asset Management to act upon the instructions set out herein.

SIGNATURE

NAME (BLOCK CAPITALS)

DATE

DD / MM / YYYY

For joint or corporate accounts, all authorised signatories must sign. Attach a separate signature page if required.

Office use only: Date received _____ Reference _____ Processed by _____

HOW TO SUBMIT

Complete all relevant fields, sign, and email the finished form together with any supporting documents to:

invest@meridian.co.ke