

# GUYANA UNIT TRUST

230 CAMP & SOUTH STREETS

GEORGETOWN

PHONE NO: 2250610-9

## REDEMPTION FORM

(To be used when disposing of units)

Account Number G.416/2

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Middle Names \_\_\_\_\_

Address \_\_\_\_\_

Name of Joint Holders 1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

I/we acknowledge that I/we are no longer interested in the units shown below: -

Number of UNITS

Price

Redeemable Cost

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20

\_\_\_\_\_  
Signature of Holder

\_\_\_\_\_  
Signature of Joint Holder

\_\_\_\_\_  
Signature of Joint Holder

\_\_\_\_\_  
Signature of Joint Holder