

# Cash Withdrawal Form (For Cash Account only)



**Please...**

- ✓ Refer to the latest version of the [Terms and Conditions for Unit Trust Accounts and Terms of Service](#) available on the iFunds platform for detailed information on fees and charges, dealing procedures, and disclosures of transaction information.
- ✓ Complete in BLOCK LETTERS. Incorrect or incomplete forms will not be processed.
- ✓ Submit this form via your financial adviser representative, who will send it to [SGP\\_iFUNDS@manulifeam.com](mailto:SGP_iFUNDS@manulifeam.com)

## Account Information

Client Name (as per iFUNDS Account) \_\_\_\_\_

Client NRIC/ Identification Number \_\_\_\_\_

Client iFUNDS Account Number \_\_\_\_\_

## SGD Cash Withdrawal (Cash Account only)

Withdrawal Mode	Currency	Cash disbursement (Please select an option)
Client's designated bank account with iFUNDS	SGD	All S\$ _____

## Foreign Currency Cash Withdrawal (Cash Account only)

Withdrawal Mode	Currency	Cash disbursement (Please select an option)
<b>Client's designated bank account with iFUNDS</b>  <b>Telegraphic Transfer (TT)</b> Name of Beneficiary Bank _____ Branch Name & Address _____ Beneficiary Bank Account Number _____ Account Holder Name _____ (must be the same as iFUNDS Account Holder name) SWIFT Code _____ Intermediary Bank Details (if any) _____ Other Remittance Instructions _____		All S\$ _____

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Withdrawal Mode	Currency	Cash disbursement (Please select an option)
<b>Client's designated bank account with iFUNDS</b>  <b>Telegraphic Transfer (TT)</b>  Name of Beneficiary Bank _____  Branch Name & Address _____  Beneficiary Bank Account Number _____  Account Holder Name (must be the same as iFUNDS Account Holder name) _____  SWIFT Code _____  Intermediary Bank Details (if any) _____  Other Remittance Instructions _____		All    S\$ _____

Withdrawal Mode	Currency	Cash disbursement (Please select an option)
<b>Client's designated bank account with iFUNDS</b>  <b>Telegraphic Transfer (TT)</b>  Name of Beneficiary Bank _____  Branch Name & Address _____  Beneficiary Bank Account Number _____  Account Holder Name (must be the same as iFUNDS Account Holder name) _____  SWIFT Code _____  Intermediary Bank Details (if any) _____  Other Remittance Instructions _____		All    S\$ _____

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**Important notes:**

1. All charges involved will be borne by you and will be deducted from the requested withdrawal amount, before the remaining balance is paid out to you.
2. Manulife IM (Singapore) may request for supporting documents and reserves its right to refuse requests for telegraphic transfers in its sole discretion.
3. Payment will be made to account holder only. No third party payment is allowed.
4. By signing this form, I confirm that I have read, understood and agree to the [Terms and Conditions for Unit Trust Accounts](#) (in particular [Schedule 2 on Risk Disclosures](#)) and [Terms of Service](#), [Terms of Use](#), [Privacy Policy](#), [Best Execution Policy](#) and all the statements above, and confirm that I wish to proceed with the above instruction.

Client Signature

Full Name

Date

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