Original : For registrar / the Management Company

			Α	ccount Ope	ening F	orm - l	ndividual	Account
krungsi Asset Mana		FATCA Status	🗌 Non US Persor		US Indicia			US Person
A member of OMUFG, a global f	°	<u>เอกสารแนบเพิ่ม</u>			W8-BEN+Rec	quired Docum	ents	□ ₩̈́9
Office / Branch:			Date:		Unitholde	er Id.:		
Account Name:								
_					(in the	case of a joint ac	count, please specify a	Il unitholder names)
Account Type	Own account	□ For account	□ Joint account					
			-	Krungsri Asset Management (				-
			it account, please s rm (Addendum).	specify the first name	e on the list o	f unitholders	a. All other unithol	ders shall give
□ Mr. □	Mrs. 🗆 Ms.	C Other (	(appecify)					
Name:				Surname:				
Date of Birth (A.D.) .	1		Nationality:					
ID Type	D ID Card	□ Pag	sport Issuing country				🗌 Alien Registr	ation Card
							· ·	
Marital Otatura						Expiry Da	ate (A.D.)	
Marital Status	Married	Sing						
Occupation	Agriculturist				□ Student		Buddhist monk / Pr	iest 🗋 Retirement
	-			place address in next item				
	State enterprise	e employee 🗌 Cor	porate employee	Family business	Doctor / Nu	Irse	Teacher	
	Politician	Gov	emment employee	Business owner	Self - empl	oyed professiona	I  Other (specify)	
Business Type	□ Antique trading		lotel / Restaurant	Foreign cur	rrency exchange		Property / Real es	state
	Jewelry / Gold tr	ading 🗌 li	nsurance / Assurance	🗌 Casino / Ga	ambling		Entertainment but	siness
	Travel Industry /	Travel Agency 🗌 l	Jniversity / School / Educati	ion Center 🛛 Armament			□ Financial service	Banking
	Domestic / Inter	national money trans	sfer	Co-operativ	ve / Foundation / A	Association / Club	) / Temple / Mosque / S	hrine
	Foreign worker	employment agency		Other (specific control of the specific control of	cify)			
Monthly Income	□ ≤ 15,000		□ 15,00 <sup>2</sup>	1 - 30,000		30,001	- 50,000	
(THB)	50,001 - 100,0			01 - 500,000			- 1,000,000	
	1,000,001 - 4,0	00,000	4,000,	,001 - 10,000,000		□ >10,00	0,000	
Source of Income	Domestic		☐ Foreign Country (s	pecify)				
	Salary		Savings				Own business	
			Retirement fund	Other (specific other)	cify)			
A	(Please specify)							Baht
Asset Value				atives. And net assets (Not				
Address as specified in identification document								
Address N	loo Building	Mooban:			Floor:	Soi:		
Road:		. Subdistrict:			District:			
Province:		. Country:			Postal Code:			
Current Address			d in identification docume					
						Soi		
	-							
FIOVINCE.		. Country			rusial Coue:			

For more details about the Management Company's privacy notice, please visit www.krungsriasset.com/pdpa/privacy-notice-en



Copy 1 : Agent / Branch

			Α	ccount Ope	ening Form	- Individual A	ccount
krungs Asset Mana		FATCA Status	Non US Person		US Indicia		] US Person
A member of OMUFG, a global f		<u>เอกสารแนบเพิ่ม</u>			W8-BEN+Required Do	cuments 🗆	] Ŵ9
Office / Branch:			Date:		Unitholder Id.:		
Account Name:							
Account Type	☐ Own account	□ For account	□ Joint account		(in the case of a jo	int account, please specify all un	tholder names)
I am desirous to open	a mutual fund account	for the purpose of inve	estment units trading via K	rungsri Asset Management (	Co., Ltd. ("the Management Co	mpany") and hereby give the follow	ing information:
		-	t account, please s m (Addendum).	pecify the first name	e on the list of unithol	ders. All other unitholder	s shall give
□ Mr. □	Mrs. 🗌 Ms.	Other (s	specify)				
Date of Birth (A.D.).							
ID Type	D ID Card	Pass	sport Issuing country			🗌 Alien Registration	Card
	ID No.:				Exp	iry Date (A.D.)	
Marital Status	Married	□ Sing	le		-		
Occupation	Agriculturist		stor	Housewife	□ Student	Buddhist monk / Priest	Retirement
	If you choose the fo	lowing occupations,	please also specify work	place address in next item			
	State enterprise	employee 🗌 Corp	oorate employee	E Family business	Doctor / Nurse	Teacher	
	Politician	Gov	ernment employee	Business owner	□ Self - employed profes	sional 🗌 Other (specify)	
Business Type	Antique trading	□н	otel / Restaurant	🗌 Foreign cu	rrency exchange	Property / Real estate	
	Jewelry / Gold tr	ading 🗌 In	surance / Assurance	🗌 Casino / Ga	ambling	Entertainment busines	S
	Travel Industry /	Travel Agency 🗌 U	niversity / School / Educati	on Center 🛛 Armament		Financial service / Bar	ıking
	Domestic / Interr	national money transf	fer	Co-operativ	ve / Foundation / Association	/ Club / Temple / Mosque / Shrine	)
	🗌 Foreign worker e	employment agency		Other (specific other)	cify)		
Monthly Income	□ ≤ 15,000		□ 15,001	1 - 30,000		),001 - 50,000	
(THB)	50,001 - 100,00			01 - 500,000		0,001 - 1,000,000	
	1,000,001 - 4,0			001 - 10,000,000		10,000,000	
Source of Income							
	Salary		Savings			Own business	
		L	Retirement fund		лу)		
Asset Value					including residential real esta	ate)	Baht
Address as spec	cified in identific	ation document	t				
Address N	/loo Building /	Mooban:			Floor: Soi:		
Road:		Subdistrict:			District:		
Province:		Country:			Postal Code:		
Current Address	s Same as	Address as specified	in identification docume	nt 🗌 Other (spec	cify)		
Address N	/loo Building /	Mooban:			Floor: Soi:		
Road:		Subdistrict:			District:		
Province:		Country:			Postal Code:		



Copy 2 : Unitholder

			Α	count Ope	ening Form -	Individual Acc	ount
krungs		FATCA Status	Non US Person		US Indicia		
Asset Mana	<u> </u>	เอกสารแนบเพิ่ม			↓ W8-BEN+Required Doc	11	
A member of OMUFG, a global f	inancial group						
Office / Branch			Date <sup>.</sup>		Unitholder Id ·		_
						nt account, please specify all unitholde	r names)
	Own account		□ Joint account				,
I am desirous to open	a mutual fund account	for the purpose of inve	estment units trading via Ki	rungsri Asset Management (	Co., Ltd. ("the Management Con	npany") and hereby give the following info	rmation:
		-	t account, please s m (Addendum).	pecify the first name	e on the list of unithold	lers. All other unitholders sha	all give
Mr.	Mrs. 🗌 Ms.	🗌 Other (	specify)				
Name:				Surname:			
Date of Birtin (A.D.) .							
ID Type	D ID Card	🗆 Pas	sport Issuing country			Alien Registration Card	
	ID No.:				Expi	y Date (A.D.)	
Marital Status	Married	□ Sinc	ıle			· · · ·	
Occupation	Aqriculturist	Inve	stor	Housewife	□ Student	Buddhist monk / Priest Re	etirement
	If you choose the fo	llowing occupations,	please also specify work	place address in next item			
	State enterprise	employee 🗌 Cor	porate employee	E Family business	Doctor / Nurse	Teacher	
	Politician		emment employee	Business owner	Self - employed profess	ional	
Business Type	Antique trading		lotel / Restaurant		rency exchange	Property / Real estate	
	Jewelry / Gold tr		isurance / Assurance	🗌 Casino / Ga		Entertainment business	
	-	<b>J</b>	Iniversity / School / Educatio		·	Financial service / Banking	
	-	national money trans				Club / Temple / Mosque / Shrine	
	Foreign worker e						
Monthly Income	_ •		□ 15,001		••	001 - 50,000	
(THB)	50,001 - 100,00	00	□ 100,00			1,001 - 1,000,000	
	1,000,001 - 4,0	00,000	4,000,0	001 - 10,000,000	□ >1	0,000,000	
Source of Income	Domestic		E Foreign Country (sp	pecify)			
	🗆 Salary		Savings	Inheritance	1	Own business	
	Investment		Retirement fund	Other (specific other)	cify)		
Asset Value					including residential real esta		Baht
Address as spe							
-					Floor: Soi		
			l in identification documer				
Current Address					• ·		
	•						
Province:		Country:			Postal Code:		



## Original : For registrar / the Management Company

Workplace Address       Company Name:       Position					
Address       Moo       Building / Mooban:       Floor       Soi         Road:       Subdistrict       Detrict       Detrict         Province:       County:       Postal Code:       Other (specify)         Address       Moo       Building / Mooban:       Floor:       Soi         Road:       Subdistrict       Detrict       Province:       Other (specify)         Address       Moo       Building / Mooban:       Floor:       Soi         Road:       Subdistrict       District       Province:       County:       Postal Code:         Province:       County:       Postal Code:       Postal Code:       Province:       Postal Code:         In order to reduce paper usage and global warning, the Managament Company wil deliver electonic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Home Telephone:       Office Telephone:       Office Telephone:         2. Other Information       I/ We in the to receive check (alc payee) payable to my name and send to the above mentioned address       wish to note check calc (alc payee) payable to my name and send to the above mentioned address         Purpose of opening an account       For Reternent       Saving account it and the above mentioned address       Saving account       Current account					
Read:       Subdistrict:       District:       Province:       Country:       Postal Code:         Province:       Country:       Postal Code:       Other (specify)         Address       Moo       Building / Mooben:       Floor       Soi:         Read:       Subdistrict:       District:       Pior       Soi:         Read:       Subdistrict:       District:       Pior       Soi:         Province:       Country:       Postal Code:       Postal Code:         E-mail:       (Please specify only one)       In order to reduce paper usage and global warning, the Management Company wil deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Home Telephone:       Office Telephone:       Office Telephone:         2. Other Information       In wish to receive check (a/c payee) payable to my name and send to the above mentioned address       wish to have the proceeds credited to my/our bank account at Bank Account No.					
Province:       Country:       Postal Code:         Delivery Address       Same as       Address as specified in identification document       Current Address       Workplace Address       Other (specify)         Address       Moo       Building / Mooban:       Floor:       Soit       Soit       Soit         Read:       Subdistrict:       District:       Province:       Country:       Postal Code:       Postal Code:       Postal Code:       Province:       Floor:       Soit:					
Delivery Address       Same as       Address as specified in identification document       Current Address       Workplace Address       Other (specify)         Address       Moo       Building / Mooban:       Floor:       Soi:       Soi:<					
Address       Moo       Building / Mooban:       Floor:       Soi:         Road:       Subdistrict:       District:         Province:       Country:       Postal Code:         E-mail: (Please specify only one)       In order to reduce paper usage and global warming, the Management Company will deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Home Telephone:       Office Telephone:         2. Other Information       Order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         Proceeds and / or Dividend       I/ We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Purpose of opening an account       For investments       For Retirement         (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Pese specif)       Name:       Sumame:         ID Card       Pespot tssing County       Alien Registration Card No.       Expiry Date (AD.).					
Road:       Subdistrict:       District:         Province:       Country:       Postal Code:         E-mail: (Please specify only one)       In order to reduce paper usage and global warning, the Management Company will deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Home Telephone:       Office Telephone:         2. Other Information       In order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         Proceeds and / or Dividend       I/ We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Bank Account No       Bank       Account No       Bank         Bank Cocount (More than one may be selected)       For investments       For Retirement         (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Pease specify)       Name:       Summe:       Expiry Date (AD,)					
Province:       Country:       Postal Code:         E-mail: (Please specify only one)       In order to reduce paper usage and global warming, the Management Company will deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Home Telephone:       Office Telephone:         2. Other Information       Order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         Proceeds and / or Dividend       Order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         Proceeds and / or Dividend       For investments       Account No.         Bank       Account No.       Bank         Bank       Country:       Proceeds credited to my/our bank account at Bank         Bank       Country:       Proceeds credited to my/our bank account at Bank       Bank         Bank       Country:       Por Retirement       Country:       Current account         Purpose of opening an account       For Tax benefits       Others (specify)       Current account       Current account         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)       Relationship with the account owner       Other (Please specify)       Sumame:       Sumame:       Sumame:       Sumame:       Sumame: <th< td=""></th<>					
E-mail: (Please specify only one)       In order to reduce paper usage and global warning, the Management Company will deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Home Telephone:       Office Telephone:         2. Other Information       Order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         Proceeds and / or Dividend       I / We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Wish to have the proceeds credited to my/our bank account at Bank       Bank Account No.       Bank Account No.         Purpose of opening an account (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Surame:         ID Card       Passport kssing County       Alien Registration Card No.       Expiry Date (A.D.)      //					
In order to reduce paper usage and global warming, the Management Company will deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Office Telephone:       Office Telephone:         Bank Account for Redemption Proceeds and / or Dividend       Order for Payment Method of Redemption Proceeds and/or Dividend       (Choose only one)         I // We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address       Outrient account at Bank         Bank Management       For restruents       For Reterment       Current account         Purpose of opening an account (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Ms.       Other (Peese specify)       Name:       Summer:       Summer:         In DC and       Passpot Issuing Continy       Alien Registration Card No.       Expiry Date (A.D.)					
In order to reduce paper usage and global warming, the Management Company will deliver electronic versions of documents to the above email address / any other email address as notified by you in the future.         Mobile Phone:       Office Telephone:       Office Telephone:         Bank Account for Redemption Proceeds and / or Dividend       Order for Payment Method of Redemption Proceeds and/or Dividend       (Choose only one)         I // We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address       Outrient account at Bank         Bank Management       For restruents       For Reterment       Current account         Purpose of opening an account (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Ms.       Other (Peese specify)       Name:       Summer:       Summer:         In DC and       Passpot Issuing Continy       Alien Registration Card No.       Expiry Date (A.D.)					
Mobile Phone:       Home Telephone:       Office Telephone:         2. Other Information       Order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         I / We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Proceeds and / or Dividend       i / We         Bank Account for Redemption       i / We         Proceeds and / or Dividend       i / We         I / We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Bank       Account No.         Bank       Account No.         Branch       Saving account         (More than one may be selected)       For Tax benefits         Port Tax benefits       Others (specify)         End beneficiary owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:         I D Card       Paspot       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)      /         Address       Moo       Building / Mooban:       Floor:       Soi:       Soi:					
2. Other Information      Bank Account for Redemption Proceeds and / or Dividend      I / We wish to receive check (a/c payee) payable to my name and send to the above mentioned address     wish to have the proceeds credited to my/our bank account at     Bank					
Bank Account for Redemption       Order for Payment Method of Redemption Proceeds and/or Dividend (Choose only one)         I / We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         wish to have the proceeds credited to my/our bank account at Bank       Bank Account No.         Branch       Saving account       Current account         Purpose of opening an account (More than one may be selected)       For investments       For Retirement         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:       Expiry Date (A.D.)         Address       Moo       Building / Mooban:       Alien Registration Card No.       Expiry Date (A.D.)       Expiry Date (A.D.)					
Bank Account for Redemption Proceeds and / or Dividend       I / We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Wish to have the proceeds credited to my/our bank account at Bank       Account No.         Bank       Account No.         Branch       Saving account         Purpose of opening an account (More than one may be selected)       For investments         For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:       Expiry Date (A.D.)       //.         Address       Moo       Building / Mooban:       Alien Registration Card No.       Expiry Date (A.D.)       //.					
Proceeds and / or Dividend       I / We       wish to receive check (a/c payee) payable to my name and send to the above mentioned address         Wish to have the proceeds credited to my/our bank account at Bank       Bank       Account No.         Branch       Branch       Current account         Purpose of opening an account (More than one may be selected)       For investments       For Retirement         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Surmame:       Surmame:         ID Card       Passport       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)      ///.					
Bank       Account No.         Branch       Branch         Branch       Saving account         Current account       Current account         Purpose of opening an account       For investments         For Tax benefits       Others (specify)         End beneficiary owner       (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:         ID Card       Passpot       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)					
Branch       Saving account       Current account         Purpose of opening an account       For investments       For Retirement         (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner       (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:         ID Card       Passport       Issuing County       Alien Registration Card No.       Expiry Date (A.D.)         Address       Moo       Building / Mooban:       Floor:       Soi:					
Purpose of opening an account       For investments       For Retirement         (More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:         ID Card       Passport       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)         Address       Moo       Building / Mooban:       Floor:       Soi:					
(More than one may be selected)       For Tax benefits       Others (specify)         End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Sumame:         ID Card       Passpott       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)         Address       Moo       Building / Mooban:       Floor:       Soi:					
End beneficiary owner (fill in only when beneficiary from account opening or person with controlling authority relating to the transaction is another person, not oneself.)         Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Surname:         ID Card       Passport       Issuing Country       Alien Registration Card No       Expiry Date (A.D.)/					
Relationship with the account owner       (1) Spouse, child, or adopted child       (2) Relatives other than (1)       (3) Others (please specify)         Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Surname:         ID Card       Passport       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)         Address       Moo       Building / Mooban:       Floor:       Soi:					
Mr.       Mrs.       Ms.       Other (Please specify)       Name:       Surname:       Surname:         ID Card       Passport       Issuing Country       Alien Registration Card No.       Expiry Date (A.D.)         Address       Moo       Building / Mooban:       Floor:       Soi:					
ID Card       Passport       Issuing Country       Expiry Date (A.D.)         Address       Moo       Floor:       Soi:					
Address Moo					
Road: District: District:					
Province:					
Mobile Phone No.:					
I am a politician or connected to a political person 🗌 No 🗌 Yes (specify)					
Signing Condition Solely Solely Signed by two person Either one Others (please specify)					
I hereby certify that the information given above is correct and also acknowledge and agree to comply with and to be bound by the terms and conditions for opening of mutual fund account of the Management Company, the terms and conditions specified in the Mutual Fund Prospectus, the terms and conditions for investment specified on the back of the					
application to open mutual fund account, and the terms and conditions as may be hereafter announced by the Management Company in all respects. I also hereby certify that the					
entering into this transaction is not for the objective of money laundering or terrorism-financing. Where I have provided to the Management Company personal data of any other person: (a) I undertake to verify the accuracy and completeness of such person's personal data					
provided by us to the Management Company, and to notify the Management Company of any change to the personal data provided; (b) I warrant that I have obtained consent or can rely on other legal basis for the collection, use, disclosure and/or transfer of such personal data in compliance with applicable laws; (c) I warrant that I have informed such person of					

the Management Company's privacy notice; and (d) I warrant that the Management Company can lawfully collect, use, and further disclose and/or transfer of such personal data for the purposes set out in the Management Company's privacy notice (as may be amended from time to time), including the purposes set out in this Form.

Signature of Applicant(s)	ي بر		)	KYC level
	Investment Consultant:		Recorded by: Employee ID:	
Staff only	License No.:	Employee ID:	Employee ID:	
	Referred by: Employee ID:		Authorized by: Employee ID:	
	Employee ID:		Employee ID:	

Copy 1 : Agent / Branch

Workplace Address					
Company Name:	Posi	tion			
Address Moo Building / Mooban:		r: Soi:			
Road: Subdistrict:	Distr	rict:			
Province: Country:	Post	al Code:			
Delivery Address Same as  Address as sp	ecified in identification document   Current Address	Workplace Address Other (specify)			
Address Moo Building / Mooban:		r: Soi:			
Road: Subdistrict:	Distr	ict:			
Province: Country:	Post	al Code:			
<b>_ </b> / <b>_</b> · · · · · · · · · · · · · · · · · · ·					
In order to reduce paper usage and global warming, the Mana	gement Company will deliver electronic versions of documents to the a	bove email address / any other email address as notified by you in the future.			
Mobile Phone:	Home Telephone:	Office Telephone:			
2. Other Information					
Bank Account for Redemption Order for	Payment Method of Redemption Proceeds and	d/or Dividend (Choose only one)			
Proceeds and / or Dividend I / We	wish to receive check (a/c payee) payable to my name and				
	wish to have the proceeds credited to my/our bank according to have the proceeds credited to my/our bank according to have the proceeds and the proceeds are the proceeds and the proceeds are th	bunt at t No			
	Branch Branch Savi				
Purpose of opening an account  For investm		······			
(More than one may be selected)	efits   Others (specify)				
End beneficiary owner (fill in only when beneficiary	from account opening or person with controlling authority re				
		(3) Others (please specify)			
· ·		Sumame:			
		Expiry Date (A.D.)/			
Address Moo Building / Mooban:					
Road: District: District:					
Province: Country:	Post	al Code:			
Mobile Phone No.:					
I am a politician or connected to a political person	] No 🔲 Yes (specify)				
Signing Condition	/o person 🔲 Either one 📄 Others (please specify)				
I hereby certify that the information given above is correct and also acknowledge and agree to comply with and to be bound by the terms and conditions for opening of mutual fund account of the Management Company, the terms and conditions specified in the Mutual Fund Prospectus, the terms and conditions for investment specified on the back of the application to open mutual fund account, and the terms and conditions as may be hereafter announced by the Management Company in all respects. I also hereby certify that the entering into this transaction is not for the objective of money laundering or terrorism-financing. Where I have provided to the Management Company personal data of any other person: (a) I undertake to verify the accuracy and completeness of such person's personal data provided by us to the Management Company, and to notify the Management Company of any change to the personal data provided; (b) I warrant that I have obtained consent or can					
rely on other legal basis for the collection, use, disclo	sure and/or transfer of such personal data in compliance with	applicable laws; (c) I warrant that I have informed such person of			

the Management Company's privacy notice; and (d) I warrant that the Management Company can lawfully collect, use, and further disclose and/or transfer of such personal data for the purposes set out in the Management Company's privacy notice (as may be amended from time to time), including the purposes set out in this Form.

Signature of Applicant(s)	£		)	KYC level
	Investment Consultant:		Recorded by:	
Staff only	License No.:	Employee ID:	Employee ID:	
	Referred by: Employee ID:		Authorized by: Employee ID:	
	Employee ID:		Employee ID:	

Copy 2 : Unitholder

Workplace Address					
		on			
Address Moo Building / Mooban:	Floor	: Soi:			
Road: Subdistrict:	Distri	st:			
Province: Country:	Posta	I Code:			
Delivery Address Same as  Address as specifie	ed in identification document 🛛 Current Address	Uvrkplace Address Other (specify)			
Address Moo Building / Mooban:	Floor	: Soi:			
Road: Subdistrict:	Distri	st:			
Province: Country:	Posta	I Code:			
In order to reduce paper usage and global warming, the Manageme	ent Company will deliver electronic versions of documents to the at	ove email address / any other email address as notified by you in the future.			
Mobile Phone:	Home Telephone:	Office Telephone:			
2. Other Information					
Bank Account for Redemption Order for Pay	ment Method of Redemption Proceeds and	/or Dividend (Choose only one)			
Proceeds and / or Dividend	sh to receive check (a/c payee) payable to my name and	send to the above mentioned address			
	sh to have the proceeds credited to my/our bank acco				
	nk Account anch 🗆 Savir	No			
Purpose of opening an account  For investments					
(More than one may be selected)	Others (specify)				
End beneficiary owner (fill in only when beneficiary from	(1 ))				
Relationship with the account owner (1) Spouse, child		(3) Others (please specify)			
Mr. Mrs. Ms. Other (Please speci	fy)fy) Name:				
□ ID Card □ Passport Issuing Country	Alien Registration Card No	Expiry Date (A.D.)/			
Address					
Road: District:					
Province:Postal Code:					
Mobile Phone No.:					
I am a politician or connected to a political person 🗌 No 📄 Yes (specify)					
Signing Condition Solely Solel					

the Management Company's privacy notice; and (d) I warrant that the Management Company can lawfully collect, use, and further disclose and/or transfer of such personal data for the purposes set out in the Management Company's privacy notice (as may be amended from time to time), including the purposes set out in this Form.

Signature of Applicant(s)	£		)	KYC level
	Investment Consultant:		Recorded by: Employee ID:	
Staff only	License No.:	Employee ID:	Employee ID:	
	Referred by: Employee ID:		Authorized by:	
	Employee ID:		Employee ID:	

## (Terms and Conditions of Investment)

The applicant (the "Investor") wishes to invest in the investment units of the Funds managed by Krungsri Asset Management Co., Ltd. (the "Management Company"), as stated in the account opening form (the "Application Form") and in accordance with the investment terms and conditions (the "Terms and Conditions"), which shall form an integral part of the Application Form to which the Terms and Conditions are attached and deemed to be the same document.

## The Investor acknowledges and agrees as follows:

- Redemption proceeds refers to money received either from the redemption of investment units by the Investor himself/herself or through automatic method.
   In the event that redemption proceeds or dividend cannot be deposited into the Investor's account for any reason (for instance, the account name is inaccurate or the account has been closed, etc.), the Investor agrees to accept the payment by specific crossed check instead.
   For Investment in retirement mutual funds and/or super savings funds established and managed by the Management Company, the Investor acknowledges that the Management Company or the registrar may deny the registration of a transfer, a pledge of investment units or placing investment units as collateral pursuant to the notifications and regulations of the Office of the SEC.
   The Management Company company

- regulations of the Office of the SEC.
  The Management Company reserves the right to accept or reject an Investor's Application Form without reason.
  Following the opening of an Investor's fund account with the Management Company reserves the right to deny, whether in whole or in part, any subscription, purchase, redemption, and/or switching of investment units pursuant to the Investor's subscription, redemption, or switching order form or any other orders, and will provide reason(s) therefore. The Management Company is entitled to perform or omit to perform any act in accordance with the fund's objective and policy and the Management Company's rights and responsibilities specified in the fund project and prospectus of each fund established and managed by the Management Company.
  In case of a joint account is opened by two Investors or more, the Management Company will deem that the person whose name appears first on the application is the person who will exercise the right as a unit holder on my behalf/ on behalf of all joint account applicants for giving investors' information on the risk profile questionnaire, acknowledging related rights reserved, signing of confirmation/consent and other documents related to purchase and/or redemption and/or switching of units or receiving redemption proceeds or receiving dividend (if any) or receiving proceeds upon termination of the fund, in this account on my behalf/ on behalf of all joint account applicants. the joint account applicants.
- The selling or redeeming supporter (the "Supporter") is an agent who accepts Investors' subscription, redemption, and/or switching orders on behalf of the Management Company.
   Allotment of investment units as per the orders is the sole responsibility of the Management Company.
   In the event that a fund account has a balance of zero and has been inactive for more than one year, the Management Company reserves the right to close the account without notice
- to the account holder.
- In case the Investor is not an institutional investor, the Investor confirm that it has received Investor's Manual or a tax manual related to retirement mutual funds and/or super savings funds, or any other documents used in the offering of investment units from the Management Company, the underwriter, the Supporter, and/or individuals serving as supporters, including staff of the said persons who function for offering of the units, and that it has good knowledge and understanding of investment in units of mutual funds as follows:

   Investors should study all information contained in the prospectus prior to making investment in the fund's investment units;
   An investment in investment units is not a deposit of money and involves certain risks. Investors may receive return greater or less than their initial investment funds, and may not the involves and prior the investment the investment to an orderated.

  - 2. Consider the control of the sector of

    - A caution about risks associated with investment in a particular fund
    - A caution about the fact that any general advice given to the Investor is not provided specifically for the Investor and is not based on an analysis of or consideration for C. the Investor's investment objective, financial status, and needs.
    - A caution about the fact that any specific advice given to the Investor is based on an analysis of the information provided by it or required to be disclosed by law and thus, should the Investor refuse to disclose personal or the most up-to-date information, it may not suit the Investor's investment objective, financial status, or needs. A caution about the fact that a fund which invests offshore may not fully hedge against foreign exchange rate risk; thus, investors may sustain loss or earn profits from foreign exchange rates or receive returns lower than its initial investment funds. d. e.
  - Decision to invest solely made by the investor shall not have binding effect upon the Management Company nor cause the Management Company to be held liable in any way; Investors in retirement mutual funds and/or super savings funds are advised to read and have a thorough understanding of the contents of the tax manual. Investors acknowledge
- Investors an real entropy does not provide tax advice or tax consultation service to them.
   The Investor acknowledges and is well aware that staff of the Management Company, the underwriter, the Supporter, and/or individuals serving as supporters, who provide service for the subscription or redemption of investment units will receive compensation as per the criteria set by the Management Company, the underwriter, and/or the Supporter (as the case may be). Such compensation is responsibility by the Management Company, the underwriter, and/or the Supporter (as the case may be). Such compensation is responsibility by the Management Company, the underwriter, and/or the Supporter (as the case may be). Such other than those specified in the fund prospectus.
- The Investor acknowledges that the Management Company, the underwriter, the Supporter, and/or individuals serving as supporters, including staff of the said persons who provide service for the subscription or redemption of investment units, have a duty and are obligated to comply with the notifications of the SEC and/or the Office of the SEC, and/or rules, regulations, or orders of any other competent authonities, or relevant laws. The Investor, therefore, agrees to provide full cooperation in all respects to the Management Company, the underwriter, the Supporter, and/or individuals serving as supporters, including staff of the said persons who provide service for the subscription or redemption of investment units.
- This cooperation shall include: a. To disclose its personal information, information required for transaction reports pursuant to the Anti-money Laundering Act B.E. 2542, and information required by other relevant laws b. To prepare or sign documents and/or any evidence requested by such persons or required by competent government officials
   12. All communications, letters, notices, and/or any other documents to be given by the Management Company to the Investor may be given by any means, either by phone, telegraph,
- 12. All communications, letters, notices, and/or any other documents to be given by the wanagement Company to the investor may be given by any means given by phone, telegraph, facsimile, electronic mail, registered mail, or non-registered mail, sending by hand, or any other methods. Any such communication sent to the telephone/fax number, email address, or mailing address stated on the Application Form, or to the telephone/fax number, email address, or mailing address most recently notified to the Management Company in writing by the Investor shall be deemed to have been duly given to the Investor, regardless of whether it was accepted by the Investor itself or by anyone. In the case of delivery failure due to the telephone/fax number, email address, or mailing address, or the change or dismantling of the physical address building without notifying in writing to the Management Company or the inaccuracy of the telephone/fax number, email address, or mailing address most recently given to the Management Company and to have learned of the contents thereof.
  13. The investor and the Management Company agree that invalid or void provision of these terms and conditions or part thereof shall not prejudice other terms and conditions or the remeet of the company of the company and to face until terms of the company of the company in email.

- In the investor and the Management Company agree that invalid or viola provision of these terms and conditions or part thereof shall not prejudice other terms and conditions or the remaining terms and conditions shall be in effect until termination. In case any clauses of the terms or conditions is in conflict or contrary to the Securities and Exchange Act and other notifications of the Securities Exchange Commission re: Criteria, Conditions, and Method for Sale and Redemption of Investment Units and Appointment of a Selling or Redemption Agent, provisions that are not in conflict or contrary to such notifications, and Method for Sale and Redemption of Investment Units and Appointment of a Selling or Redemption Agent, provisions that are not in conflict or contrary to such notifications, and Method for Sale and Redemption of Investment Units and Appointment of a Selling or Redemption Agent, provisions that are not in conflict or contrary to such notifications, and Method for Sale and Redemption of Investment Units and Appointment of a Selling or Redemption Agent, provisions that are not in conflict or contrary to such notifications, and Method for Sale and Redemption of Investment Units and Appointment of a Selling or Redemption Agent, provisions that are not in conflict or contrary to such notifications, and Method for Sale and Redemption of Investment Units and Appointment of a Selling or Redemption Agent, provisions that are not in conflict or contrary to such accounts opened with Krungsri Asset Management Company such as required by local or international laws or authority (including FATCA and Anti-Money Laundering Law) and a greement in FATCA Form and related documents to the Management Company, as requested by the Management Company, and all funds managed by the Management Company, the selling agent for use in account opening and actions related to all of my investment accounts opened with the Management Company (ace and international laws (including FATCA and Anti-Money Laundering Law) and in or
- In the case that the investor provides the personal data of third parties in addition to his/her own personal data to the Management Company:

   The investor undertakes to verify the accuracy and completeness of the personal data of the third parties which he/she provides to the Management Company and notify the Management Company of any changes in the provided personal data (if any);
  - b. The Investor has obtained consent or undertakes that it can rely on other legal grounds to collect, use, disclose and/or transfer the personal data of such third

  - The Investor undertakes that he she has notified such third parties of the relevant Privacy Notice; and The Investor undertakes that he she has notified such third parties of the relevant Privacy Notice; and The Investor undertakes that the Management Company can collect, use, disclose and/or transfer the personal data in accordance with the purposes specified in the Privacy Notice, which may be altered from time to time, including all of the purposes specified in the Application Form for Account Opening and these terms and conditions.

## Krungsri Asset Management Co., Ltd.,

1st-2nd Zone A. 12th. 18th Zone B Floor. Ploenchit Tower 898 Ploenchit Road. Lumpini Pathumwan. Bangkok 10330 Tel. 02-657-5757 Fax. 02-657-5777