

## THE SOCIALIST REPUBLIC OF VIETNAM Independence - Freedom - Happiness ---000----

Ho Chi Minh City, \_\_\_\_\_

## **AUTHORIZATION FORM**

(For Authorizee only)

DC INCOME PLUS BOND FUND (DCIP) To:

Investor's name:	
is the investor of DC Income Plus Bond Fund.	
ID/Business License no.:	datedatat
Email:	Tel:
Address:	
Fund trading account:	
Total fund units owned:	
Required information of ins	stitutional investors
Legal Representative:	
ID/Passport No/ID:d	ated place of issue:
Now, I/We would like to authorize to:	
1. Fund Manager/ Member of Board of Represer	itatives (Note: only choose one)
☐ Mr. Nguyen Sang Loc – Fund Manager	
☐ Ms. Tran Ngoc Han – Member of Board of Representatives	
If the attorney under this Section 1 absents onesel and the authorization form shall have no validity.	f from the meeting, I/we disagreed to authorize
Or:	
2. Authorizee's name:	
ID no.:	datedata
Address:	
Email:	
On behalf of I/ My company to attend and vote in all Meeting of Investors of Financial Year $2023 - 2^{\text{nd}}$ c	I points mentioned the Annual General all of DCIP on Tuesday, May 14 <sup>th</sup> , 2024.
Authorizee	Authorizer
(Sign and seal)	(Sign and seal)
*** Please kindly fax and post this Authorization form (original co	opy) to the following address: