

REDEMPTION FORM

Email: completed and signed redemption form to forms@peregrine.co.za by the last business day of the month, 1 calendar month before the desired redemption trade date.

1. INVESTOR DETAILS

Investor Number	
Name & Surname/Entity name	
Identity/Passport/Registration Number	

2. REDEMPTION INSTRUCTION

Do you want to redeem all available shares in this account: Yes ☐ No ☐

If you would like to do a partial redemption, please complete the table below

Fund	Peregrine Capital Vision Fund Segregated Portfolio of the South Africa Alpha SPC		
Redemption amount (USD)		OR Number of Shares	
Redemption date			

3. INVESTOR'S BANK ACCOUNT DETAILS

Funds should be transferred to the following account.

Name of Account Holder	
Name of Bank	
Branch Name	
Branch Code	
Account Number	
IBAN	
SWIFT	
Intermediary Account (if applicable)	
Name of Account Holder	
Name of Bank	
Account Number	
IBAN	
SWIFT	

4. SHAREHOLDER'S REPRESENTATIONS AND WARRANTIES

By signing this redemption form, the Subscriber, or where applicable, the Subscriber's authorized signatory:

- 4.1 confirms that all information in this form is correct.
- 4.2 hereby authorizes and instructs the Fund and the Administrator to accept and execute the Redemption instruction in respect of the sale of shares.

1st Signatory					
Name		Signature		Date	
2nd Signatory					
Name		Signature		Date	