

CREATION / REDEMPTION ORDER APPLICATION FORM

Please email the order application form to:

ATR Financial Advisory and Management Inc. (the "Principal Distributor") at ta@atrfami.com.ph

First Metro Philippine Equity Exchange Traded Fund, Inc.

Stock Code: FMETF

The order application form should be received by the Principal Distributor **before 11:30 am (Philippine time) of the respective Business Day.**

We confirm and agree to:

☐ **Create and Subscribe** for the number of shares referred to below in the above ETF at the Issue Price;

☐ **Redeem** for the number of Shares referred to below in the above ETF at the Redemption value,

on the relevant Business Day, subject to the Fund Documentation, Participation Agreement and its Supplemental Participation Agreement (if any), and the First Metro Philippine Equity ETF Clearing Process.

Name of Authorised Participant/ Investor: _____

Dealing Date: _____

Creation /Redemption Order Number: _____ <to be filled in by FMETF representative>

Number of Shares to **subscribe/redeem**: _____ Shares

Cash Payment (for the Transaction Fee): **PhP** _____

Authorised Participant's SCCP Account Number: _____

Contact Information:

Telephone: _____ Fax: _____

Address: _____

Source of funds for investment (please tick one box only):

☐ from underlying investors

☐ for the company's own account

☐ others (please specify): _____

For Creation and Subscription:

(1) Component Securities should be transferred free of payment to:-

Securities Account Name: **First Metro Philippine Equity Exchange Traded Fund**

Securities Account Number: **026-237446-550**

Note: Component Securities should be transferred to the above account before [12:00 noon] on [Trade Day +3].

(2) Payment should be made as below by quoting reference of [name of subscriber] for subscription of
First Metro Philippine Equity Exchange Traded Fund, Inc.:

Bank Name: The Hongkong and Shanghai Banking Corporation Ltd

Bank Address:

Swift Address:

Bank Account No.: **[026-237446-150]**

Bank Account Name: **First Metro Philippine Equity Exchange Traded Fund, Inc.**

Quoting Reference: by order of [name of subscriber (PD)] for subscription of **First Metro Philippine Equity Exchange Traded Fund, Inc.**

Note: The cash payment should be remitted to the above account before [12:00 noon] on [Trade Day + 3].

For Redemption:

Standing Wire Instruction for receiving Component Securities and cash payment (if applicable) :

Securities Account Name:

Securities Account Number:

Bank Name: _____

Bank Account No.: _____

Bank Account Name: _____

SWIFT Code (if applicable): _____

Euroclear Account Name (if applicable): _____

Reference: _____

Application Fee: (Note: In accordance with the fee terms as agreed between the Manager and HSBC)

- [PhP xxx] per creation and redemption application
- [PhP xxx] per application for Cancellation

We confirm and agree to the subscription/creation or redemption as selected above for Shares in the above Fund at the closing NAVps on the relevant Business Day. We agree and acknowledge to the terms and conditions of the Fund documentation, as amended from time to time.

All Creation and Redemption Orders are subject to the terms and conditions of the Prospectus of the First Metro Equity Exchange Traded Fund, Inc. (the "Prospectus") and the First Metro ETF Authorized Participant Agreement by and among the Authorized Participant, the Fund and the Fund Manager. All representations and warranties of the Authorized Participant set forth in the First Metro ETF Authorized Participant Agreement are incorporated herein by reference. Capitalized terms used but not defined herein have the meaning given in the Prospectus, the Custodian Agreement and the First Metro ETF Authorized Participant Agreement as the case may be.

Authorized Signature (s) of the Authorised Participant:

_____ Date: _____

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Completed by First Metro Asset Management, Inc.

☐ Accept Creation Application      ☐ Reject Creation Application  
☐ Confirm Cash Amount      Settlement Date of ETF Units: \_\_\_\_\_

☐ Accept Redemption Application      ☐ Reject Redemption Application

Authorized Signature(s):

\_\_\_\_\_ Date: \_\_\_\_\_

[Name of the Manager]