

Transaction Form



Time Stamp

Distributor/Broker Code ARN- 132061 (hp here)	Sub-Broker ARN Sub-Broker Code	Relationship Manager's Name Mobile EUIN E352389	Branch Code
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If Employee Unique Identification Number (EUIN) details are not provided, the investor(s) agrees that: I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

X (Sole/First Applicant)

X (Second Applicant)

X (Third Applicant)

Initial commission will be paid by the investor directly to the distributor, based on the service rendered and assessment of any other factors.

Please refer to the guidance notes for assistance and complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink.

PERSONAL DETAILS (see note 1)

First Unit Holder	Folio No.
PAN	

KYC is mandatory. Please enclose a copy of KYC acknowledgement letters for all applicants.

PURCHASE (see note 2)

Scheme Option (✓) <input type="checkbox"/> Growth* <input type="checkbox"/> Bonus (available in select schemes only) <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvest			
Dividend Frequency			
Investment Amount (Rs.)	DD Charges, if applicable (Rs.)	Net Amount (Cheque/DD) (Rs.)	A minus B
Mode of Payment (✓)			
<input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> Fund Transfer <input type="checkbox"/> RTGS <input type="checkbox"/> NEFT	Payment made by (✓) (Please refer notes on 3rd party payments overleaf)		
<input type="checkbox"/> First/Second/Third Unit Holder <input type="checkbox"/> Guardian <input type="checkbox"/> Others			
Cheque No.	Dated	Drawn on Bank	
Branch		City	
NRI Investor, please specify account type (✓)			
<input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Others (please specify)		Reason for your SIP (✓)	
<input type="checkbox"/> Children's Education <input type="checkbox"/> Children's Marriage <input type="checkbox"/> House <input type="checkbox"/> Car <input type="checkbox"/> Retirement			

REDEMPTION (see note 3)

Scheme	Dividend Frequency
Option (✓) <input type="checkbox"/> Growth <input type="checkbox"/> Bonus <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment	Amount (Rs.)
No. of Units	All Units (✓) <input type="checkbox"/>

If you have changed your bank and have not informed us of the change, your money will be credited to the bank account registered with us

SWITCH (see note 4)

From Scheme	Dividend Frequency	Option (✓) <input type="checkbox"/> Growth <input type="checkbox"/> Bonus <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment
To Scheme	Dividend Frequency	Option (✓) <input type="checkbox"/> Growth* <input type="checkbox"/> Bonus <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment
Amount (Rs.)	No. of Units	All Units (✓) <input type="checkbox"/>

SYSTEMATIC WITHDRAWAL PLAN (SWP) (see note 5)

From Scheme	Dividend Frequency
Option (✓) <input type="checkbox"/> Growth <input type="checkbox"/> Bonus <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment	
Withdrawal Preference <input type="checkbox"/> Amount* <input type="checkbox"/> Capital Appreciation	Withdrawal Instalment x No. of Instalments
Withdrawal From (First Instalment)	To (Last Instalment)
Withdrawal Date	Withdrawal Frequency (✓)
<input type="checkbox"/> 1st <input type="checkbox"/> 5th <input type="checkbox"/> 10th* <input type="checkbox"/> 15th <input type="checkbox"/> 25th	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly

SYSTEMATIC TRANSFER PLAN (STP) (see note 6)

From Scheme	Option (✓) <input type="checkbox"/> Growth <input type="checkbox"/> Bonus <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment	Dividend Frequency
To Scheme	Option (✓) <input type="checkbox"/> Growth* <input type="checkbox"/> Bonus <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment	Dividend Frequency
Transfer Preference (✓)	Transfer Instalment Rs. x No. of Instalments	Total Transfer Rs.
<input type="checkbox"/> Amount* <input type="checkbox"/> Capital Appreciation	Transfer Period	From (First Instalment)
		To (Last Instalment)
Transfer Frequency (Please choose from the options mentioned here) (✓)	Weekly (✓) <input type="checkbox"/> Mon* <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri	Fortnightly <input type="checkbox"/> Date <input type="checkbox"/> 1st <input type="checkbox"/> 15th*
		Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Date <input type="checkbox"/> 1st <input type="checkbox"/> 5th <input type="checkbox"/> 10th* <input type="checkbox"/> 15th <input type="checkbox"/> 25th

*Default option if not selected

YOUR SIGNATURE/S (To be signed by all joint holders)

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. I/We understand that the upfront commission will be paid directly by me/us to the AMFI registered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed the commissions to me/us (in trail commission or any other), payable to him for different schemes of mutual funds from amongst which the scheme is being recommended to me/us.

Date

X (Sole/First Unit Holder)

X (Second Unit Holder)

X (Third Unit Holder)

ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)

Received from	Name of the Sole/First Unit Holder	Folio No.
Scheme	Option	Amount
<input type="checkbox"/> Purchase <input type="checkbox"/> Cheque No.	Dated	Drawn on Bank
<input type="checkbox"/> Redemption <input type="checkbox"/> Amount	<input type="checkbox"/> Units	All Units
<input type="checkbox"/> Switch <input type="checkbox"/> Amount	<input type="checkbox"/> Units	All Units to
<input type="checkbox"/> SWP <input type="checkbox"/> Instalment Amount	No. of Instalments	Frequency (Please ✓) <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly
<input type="checkbox"/> STP <input type="checkbox"/> Instalment Amount	No. of Instalments	to
Frequency (Please ✓) <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly		



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Acknowledgement Stamp & Date