

FINANCIA (Use separate slips		NSACTION F ancial Transaction)	ORM		For Pu	FOR EXISTING INVESTOR ONLY rchase/Redemption/Switch	
ARN	24603 &	NAME	Branch Code (only for SBG		Sub-Brok Code	(Er E024583 e Identification Number) Reference No.	
manager/sales person of	the above distrib	ion (only where EUIN box is lef has been intentionally left blank utor or notwithstanding the adv ry fees on this transaction.	t blank) c by me/us as this is vice of in-appropriate	an "execution-only" transac eness, if any, provided by th	tion without any e employee/relat	y interaction or advice by the employee/relationship tionship manager/sales person of the distributor and	
Signature(s)	1st Holder/Guardian /Authorised Signatory 2nd			d Holder		3rd Holder	
Folio No.					Tax Status		
Name of Investor					Mode of Hol	Iding	
PAN / PEKRN	1st Holder/Guardian 2nc			d Holder	3rd Holder		
KYC Status				d Holder		3rd Holder	
•		e Transaction slip needs to b	e counter signed by				
ADDITIONAL P	URCHASE			SWITCH			
Scheme Name				From Scheme			
Plan	Regular	Direct		Plan	Regular	Direct	
Option	Growth	IDCW (Dividend)		Option	Growth	DCW (Dividend)	
		Daily Weekly Fort	nightly Monthly			Daily Weekly Fortnightly Monthly	
		Quarterly Half Yearly	Annually			Quarterly Half Yearly Annually	
IDCW Facility	Payout Reinvest		No. of Units/	□	Units OR All Units OR		
Mode of Payment	Cheque/DD RTGS/NEFT OTM			Amount		(Amt. in Rs.)	
Amount	(Amt. in Rs.)			To Scheme		Amount in Words	
	Amount in Words		Plan	Regular	Direct		
Cheque/DD/RTGS/ NEFT/OTM Ref. No.			Date	Option	Growth	DCW (Dividend)	
Bank A/c No.				·		Daily Weekly Fortnightly Monthly	
Bank Name						Quarterly Half Yearly Annually	
Branch Name				IDCW Facility	Payout	Reinvest	
REDEMPTION				SIGNATURE(S)			
Scheme Name				I/We have read & understood the contents of the Scheme Information Document, KIM and Addendum(s) of the respective Scheme(s) and agree to abide by the Terms & Conditions, Rules & Registrations as applicable from time to time. Please sign as per mode of holding in Folio.			
Plan	Regular	Direct					
Option	Growth	DCW (Dividend)		Please sign as per m	ode of holding	g in Folio.	
			nightly Monthly		6 4 4 A 11		
	Quarterly Half Yearly Annually Units OR All Units OR			Signature of 1st Applicant/Guardian/Authorised Signatory			
No. of Units/ Amount	Units OR All Units OR (Amt. in Rs.)						
Redemption Payout Bank	To my Default Bank account Registered in the Folio OR To the following other Bank account Registered in the Folio			Signature of 2nd Applicant			
(Payment will be made only to the Registered Bank	Bank Name/Branch			Signature of 3rd Applicant			
account)		Bank Account Number				e or ora appreant	
Date:				Place			

Place:

ACKNOWLEDGEMENT							
Folio No.	Investor Name	Investor Name					
Scheme Name	Plan 🗌 Regular 🗌 Direct	Option Growth IDCW					
Additional Purchase	Redemption	Switch					
Cheque Details	No of Units	To Scheme Name					
Amount (Rs.)	Amount (Rs.)	Units/Amount (Rs.)					