



## COMMON TRANSACTION FORM (for One Transaction Only)

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM.)

Distributor <b>ARN-64917</b>	Sub Broker Name / ARN No. / RIA No.	Sub Broker Code	Em <b>E434563</b> (EJIN)	ARN Declaration - Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors assessment of various factors including the service rendered by the distributor.
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Please sign below, in case the EJIN is left blank/not provided: I/We hereby confirm that the EJIN 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 in-appropriateness, 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. (refer inst no. A-4) [To be signed by all applicants, if mode of holding is joint]

Signature	First Unitholder / Authorised Signatory	Second Unitholder	Third Unitholder
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FOLIO NUMBER (Mandatory) :  Date :

1st Unitholder Name	2nd Unitholder Name	3rd Unitholder Name
PAN / PEKRN (Mandatory) <input type="text"/>	PAN / PEKRN (Mandatory) <input type="text"/>	PAN / PEKRN (Mandatory) <input type="text"/>
CKYC Number <input type="text"/> (Prefix if any)	CKYC Number <input type="text"/> (Prefix if any)	CKYC Number <input type="text"/> (Prefix if any)

ADDITIONAL PURCHASE (Cheque / DD payment favouring "Scheme Name") Refer Instruction Section B

Scheme: \_\_\_\_\_ Plan : \_\_\_\_\_ Option: \_\_\_\_\_ Sweep to (applicable only for Dividend Option) \_\_\_\_\_

Payment Mode:  OTM (One Time Mandate)  Cheque/DD  NEFT/RTGS  Fund Transfer  Others \_\_\_\_\_ Please Specify \_\_\_\_\_ payable to the above scheme drawn on (Bank Name & Branch Address) \_\_\_\_\_ Mandatory for OTM

Amount (₹):  DD Charges:  Net Amount (₹):

Chq/DD No.: \_\_\_\_\_ / UTR / REF. No. \_\_\_\_\_ Dated:

In case you do not mention the Plan and Option, units will be allotted under default option as per respective scheme related documents.

REDEMPTION

Scheme: **ABSL** Plan : \_\_\_\_\_ Option: \_\_\_\_\_

Please redeem (₹):  or \_\_\_\_\_ units.

If you have registered for multiple bank account facility in the above folio please specify the bank details in which you wish to receive the redemption proceeds. The bank account should be one of the registered bank account in the folio else the payout will be released to the default bank account registered in the folio.

Bank Name  Account No.

SWITCH

I/We would like to switch ₹  or \_\_\_\_\_ units

FROM SCHEME / PLAN **ABSL** Option \_\_\_\_\_

TO SCHEME / PLAN **ABSL** Option \_\_\_\_\_ Sweep to (applicable only for Dividend Option) \_\_\_\_\_

ALLOT UNITS IN DEMAT MODE (OPTIONAL) (Please ensure that the sequence of names in the folio matches with that of the A/c. held with the depository participant)

NSDL: Depository Participant Name: \_\_\_\_\_ DP ID No.:       Beneficiary A/c No.  Enclosed: Client Master

CDSL: Depository Participant Name: \_\_\_\_\_ Beneficiary A/c No.  Transaction/ Statement Copy/ DIS Copy

### DECLARATION(S) & SIGNATURE(S)

To,  
The Trustee, Aditya Birla Sun Life Mutual Fund

Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of scheme & agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We acknowledge that the RIA has entered into an agreement with the AMC / MF for accepting transaction feeds under the code. I/We hereby indemnify, defend and hold harmless the AMC / MF against any regulatory action, damage or liability that they may suffer, incur or become subject to in connection therewith or arising from sharing, disclosing and transferring of the aforesaid information. I/We confirm that details provided by me/us are true and correct.

Signature	First Unitholder / Authorised Signatory	Second Unitholder	Third Unitholder
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### Acknowledgement Slip (To be filled in by the Investor)

### COMMON TRANSACTION FORM

Folio No.: \_\_\_\_\_  Purchase  Switch  Redemption Date: \_\_\_\_\_

Scheme: \_\_\_\_\_ Amount (₹) \_\_\_\_\_ or Units \_\_\_\_\_

From Scheme (in case of switch) \_\_\_\_\_ To Scheme \_\_\_\_\_

Collection Centre /  
ABSLAMC Stamp & Signature



## Non-Financial Transaction Form

ARN-64917

E434563

Folio No.

Name

### 1. UPDATE CONTACT DETAILS

Mobile No.

This mobile number pertains to (Mandatory):  Self  Spouse  Dependent Children  Dependent Parents  Dependent Siblings  Guardian  POA  PMS  Custodian (for FPIs only)

Email ID

This email id pertains to (Mandatory):  Self  Spouse  Dependent Children  Dependent Parents  Dependent Siblings  Guardian  POA  PMS  Custodian (for FPIs only)

### 2. Update PAN/KYC

Enclosed herewith:

Photo copy of PAN card

Photo copy of KYC

1<sup>st</sup> Applicant/Guardian

2<sup>nd</sup> Applicant

3<sup>rd</sup> Applicant

### 3. FATCA & CRS INFORMATION [Please tick (✓)] For Individual Investors including Sole Proprietor (Non Individual Investors should mandatorily fill separate FATCA detail form)

Details	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	Guardian/POA
Place & Country of Birth				
Nationality				
Are you a tax resident of any other country other than India	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes: Mandatory to enclose FATCA / CRS Annexure				

### 4. Cancellation of SIP/STP/SWP

Scheme Name: \_\_\_\_\_ Installment Amount: \_\_\_\_\_ Installment Date: \_\_\_\_\_  
 (If SIP) Bank Name: \_\_\_\_\_ Bank A/c: \_\_\_\_\_ Installment Date: \_\_\_\_\_ Installment Amount: \_\_\_\_\_  
 (If STP) To Scheme: \_\_\_\_\_ Option: \_\_\_\_\_  
 (If SWP) Scheme Name: \_\_\_\_\_ Amount: \_\_\_\_\_

### 5. Change in Mode of Holding

"Joint "To" Anyone or Survivor"  "Anyone or Survivor" To "Joint"

### 6. Nomination Details

Registration

Change/Modification

Cancellation

Nominee Details					
	Name & Address of Nominee	Relationship with Applicant:	Name of Guardian (In case of Minor)	Signature of Guardian/Nominee	Percentage of Allocation
Nominee 1					
Nominee 2					
Nominee 3					

Request for mode of holding change and nominee change should be mandatorily signed by all the holders.

### 7. Change of Income Distribution cum capital withdrawal option

Scheme Name: \_\_\_\_\_  
 Payout of IDCW to Reinvestment of IDCW\*  Reinvestment of IDCW to Payout of IDCW\*  \*Income Distribution cum capital withdrawal option

Acknowledgement Copy (To be filled in by the Investor)

NON-FINANCIAL TRANSACTION FORM

Folio No.

Received from Mr. / Ms. \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

Update of Contact details  Update PAN/KYC  Cancellation of SIP/STP/SWP  Change mode of Holding  Nomination  Change bank details  Change Income Distribution cum capital withdrawal option  Revalidation of Income Distribution cum capital withdrawal option/Redemption Cheque  FATCA/CRS

Collection Centre /  
ABSLAMC Stamp & Signature

Aditya Birla Sun Life AMC Limited (Investment Manager to Aditya Birla Sun Life Mutual Fund)

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