

TRANSACTION SLIP

Please use separate transaction slip for each scheme. This Form is for use of Existing Investors only. To be filled in CAPITAL LETTERS

Distributor/ RIA Code Sub Agent A	RN Sub Agent Code/Bank Branch Code/Internal Code	Employee Unique Identification Number
ARNARN-64917		E434563
manager/sales person of the above distributor/sub broker or sub broker and the distributor has not charged any advisor	has been intentionally left blank by me/us as this transaction is executed without a notwithstanding the advice of in-appropriateness, if any, provided by the employee/y fees on this transaction. RIA Declaration: I/We hereby give you my/our consent rect Plan of all Schemes managed by you, to the above-mentioned SEBI-Registerer, if applicable.	relationship manager/sales person of the distributor/to share/provide the transactions data feed/portfolio
Signature of Sole/First Applicant/Guardian	Signature of Second Applicant	Signature of Third Applicant
2. Investor Details		
FOLIO NO.		
Name of First applicant Mr./Ms./M/s	PAN No / PEKRN. M A	N D A T O R Y KYC
3. DEMAT ACCOUNT INFORMATION (Mandat	ory for crediting units in demat account)	
If you wish to hold your investment in dematerialised mode pleas	e furnish the below details and enclose a copy of the Client Master/Transaction Cum Hold	ing Statement/ Cancelled delivery instruction slip.
NSDL DP Name	DP ID I N Benefici	
CDSL DP Name	Beneficiary Account No.	
4. Additional Purchase (If the investor wishes	to invest in Direct Plan please mention Direct Plan against the	scheme name)
Payment Mode: OTBM Facility (One Time Bank	Mandate) Cheque DD Funds Transfer RTGS / I	NEFT
Scheme	Plan	Option
Net Amount ₹ DD Charge ₹	Bank Name: Brance	n: City:
Cheque/DD/RTGS/NEFT No.		nstrument Date / /
LEI No.:	Valid upto:	El No. is Mandatory for transaction amount ₹50 Crs and above Individual.
5. Switch (If the investor wishes to invest in Direct	t Plan please mention Direct Plan against the scheme name)	
Partial Switch Amount: ₹		
From Scheme	Plan	Option
To Scheme	Plan	Option
6. Redemption		
Partial Redemption Amount: ₹		
Partial Redemption Amount: ₹ Scheme	Plan	Option
Partial Redemption Amount: ₹	Plan Note: Li	
Partial Redemption Amount: ₹ Scheme LEI No.: *Bank Account No.	Plan Valid upto: Note: LI Note: Name of Bank	Option
Partial Redemption Amount: ₹ Scheme LEI No.: *Bank Account No. * (Please specify the bank details in which you wish to default the redemption proceeds will be credited into the de Note: In case change of bank details request has been sub	Plan	Option
Partial Redemption Amount: ₹ Scheme LEI No.: *Bank Account No. * (Please specify the bank details in which you wish to default the redemption proceeds will be credited into the de Note: In case change of bank details request has been sub 8th calendar day. If the 8th calendar day is a holiday / non-terms.	Plan Valid upto: Name of Bank receive the redemption proceeds. Kindly note that this bank account should be of fault bank account. Also this cannot be treated as change of bank mandate.) mitted in last 10 days, we may HOLD the redemption payout for 7 calendar days as	Option
Partial Redemption Amount: ₹ Scheme LEI No.: *Bank Account No. * (Please specify the bank details in which you wish to default the redemption proceeds will be credited into the de Note: In case change of bank details request has been sub 8th calendar day. If the 8th calendar day is a holiday / non-terms.	Plan Valid upto: Name of Bank Receive the redemption proceeds. Kindly note that this bank account should be of fault bank account. Also this cannot be treated as change of bank mandate.) mitted in last 10 days, we may HOLD the redemption payout for 7 calendar days as ransaction day, then the redemption payout will be made on the next working day.	Option
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COMMON TRANSACTION REQUEST - NON FINANCIAL TRANSACTION

For Existing Unitholder(s) holding units in physical mode, please read documentation required and Terms and Conditions overleaf.

IMPORTANT: Please str	ike off the unused so	ection(s) to prevent any unau	thorised use.	DATE D D M	M Y Y Y Y
UNIT HOLDER'S INFOR	RMATION (Mandato	ry)			
Folio No(s)					
Sole/1st applicant					
A. CHANGE OF STATU	S (Change of status	from RI to NRI or Vice Versa)	RI to NRI	☐ NRI to RI	
OVERSEAS ADDRESS (Mandatory - in case o	f RI to NRI)			
Address					
State		PIN		Country	
B. CHANGE OF BANK	MANDATE (MANDA	TORY TO ATTACH OLD AND	NEW BANK ACCOUNT P	PROOF)	
Account Number			Account Type	e Savings Current	□NRE □NRO □FCNR
Name of Bank					
Branch Name			Branch City		
9 Digit MICR Code			11 Digit IFSC		
C. PAN, DOB and KYC	Updation				
PAN of Sole/ First Applicant/Guardian			Date of Birth D D M	M Y Y Y Y	CKI No.
PAN of Second Applicant			Date of Birth D D M	M Y Y Y Y	CKI No.
PAN of Third Applicant			Date of Birth D D M	M Y Y Y Y	CKI No.
D. Change / Updation of	of Contact Details of	Sole / First Applicant			
Mobile No.		Tel. No. STD Code	Office	Reside	nce
Mobile No. pertains to	Self Spot	ice Dependent Children	Dependent Siblings	Dependent Parents	A Guardian in case of minor
Email ID (CAPITAL letters	s only)				
Email ID pertains to	Self Spou	ce Dependent Children	Dependent Siblings	Dependent Parents	A Guardian in case of minor
E. CHANGE IN MODE O	OF HOLDING (MOH)	from Joint to Anyone or su	rvivor or vice-versa (Pleas	se tick the proposed MOH)	
All unit holders should sig	n the form irrespective	of mode of holding in the folio	Please tick (✓): Joint	Any one or Survivor
F. DETAILS OF POA (P	ower OF ATTORNE	Y)	Reç	gistration	Cancellation
Name Of POA Holder	Mr Ms.M/s				
PAN of the POA Holder			Attached KYC Lette	r (Mandatory) Notarize	ed copy of PoA (Mandatory)
G. CONSOLIDATION C	F FOLIOS				
Note:		s of unit holders, b) Address of	Target Folio		
	of holding, d) Order of	unit holders, e) Tax status and		nsolidate all my/our investments u	under specified folios into one folio.
	rget Folio will be ap	nandate, address and nomina- plicable and will prevail after			
	e target folio has be	en retained for your redemp-			

1. PAYOUT TO REINVESTMENT REINVESTMENT TO PAYOUT 2. PAYOUT TO REINVESTMENT TO PAYOUT 3. PAYOUT TO REINVESTMENT TO PAYOUT 3. PAYOUT TO REINVESTMENT TO PAYOUT 4. REVALIDATION OF IDCW/ REDEMPTION CHEQUE Wilve are in receipt of Redemption / Dividend warrant as below:	H. CHANGE OF IDC	W Option						
2. PAYOUT O REMVESTMENT REINVESTMENT TO PAYOUT REVALIDATION OF IDCW/ REDEMPTION CHEQUE We are in receipt of Redemption / Dividend warrant as below: Cheque No.		sc	HEME NAME			ОРТ	IONS	
REVALIDATION OF IDCW/ REDEMPTION CHEQUE We are in receipt of Redemption / Dividend warrant as below: Cheque No. Cheque Date D M M Y Y Y Y Cheque Amount What are herewith enclosing the warrant as I/We could not deposit the same due to the below reason: Bank account number incorrecty mentioned Bank account mentioned was inactive/closed Werrant validity period has expired Other Wer request you to: Reissue the said warrant after necessary revalidation without change in bank Mandate. **Upload the above new bank details and make payment in new bank through NEFT/RTGS. (**NOTE: Above Point No. B should be mandatorily filled to facilitate NEFT/RTGS) MOMINATION (NOMINEE (OPT-IN) Details or OPT-OUT Declaration is Mandatory to process the application. (REGISTRATION /CHANGE MODIFICATION /CANCELLATION OF NOMINATION) OPT-IN Nominee Name & PAN of Nominee Date of Nominee Relation with (in case Nominee in Minory) Relation with (in case Nominee in Minory) OD MM YYYY	1.				PAYOUT TO	REINVESTMENT	REINVEST	MENT TO PAYOUT
REVALIDATION OF IDCW/ REDEMPTION CHEQUE We are in receipt of Redemption / Dividend warrant as below: Cheque No. Cheque Date DMM Y Y Y Cheque Amount Cheque No. Cheque	2.				PAYOUT TO			
We are in receipt of Redemption / Dividend warrant as below: theque No.	3.							MENT TO PAYOUT
Cheque No. Cheque Date D D M M Y Y Y Y Cheque Amount	REVALIDATION O	F IDCW/ REDEM	IPTION CHEQUE					
We are herewith enclosing the warrant as I/We could not deposit the same due to the below reason: Bank account number incorrecty mentioned	We are in receipt of	Redemption / Div	vidend warrant as b	elow:				
Bank account mentioned Bank account mentioned was inactive/closed Werrant validity period has expired Other Werequest you to: Reissue the said warrant after necessary revalidation without change in bank Mandate. **Upload the above new bank details and make payment in new bank through NEFT/RTGS. (**NOTE: Above Point No. B should be mandatorily filled to facilitate NEFT/RTGS) I. NOMINATION (NOMINEE (OPT-IN) Details or OPT-OUT Declaration is Mandatory to process the application. (REGISTRATION /CHANGE MODIFICATION /CANCELLATION OF NOMINATION) OPT-IN Nominee Name & PAN of Nominee (Optional) Date of Nominee (Optional) Nominee Nominee (Optional) Nominee Nominee (Optional) Nominee Nominee (Optional) Nominee Nominee (Optional) Nominee (Optional) Nominee Nominee (Optional) Nominee (Optiona	heque No.		Cheque Date	D D M N	I Y Y Y Y	Cheque Amount		
* Reissue the said warrant after necessary revalidation without change in bank Mandate. * Upload the above new bank details and make payment in new bank through NEFT/RTGS. (** NOTE: Above Point No. B should be mandatorily filled to facilitate NEFT/RTGS) NOMINATION (NOMINEE (OPT-IN) Details or OPT-OUT Declaration is Mandatory to process the application. (REGISTRATION /CHANGE MODIFICATION /CANCELLATION OF NOMINATION) OPT-IN Nominee Name & PAN of Nominee (Optional) Date of Silth of Nominee Relation with Nominee (Optional) Nominee Relation with Nominee (Optional) DD MM YYYY DD MM YY	Bank account nur	mber incorrecty i	mentioned	Bank accoun		/closed		
Nominee Name & PAN of Nominee (Optional) Date of Birth of Nominee (Optional) DD MM YYYY DD M YWY DD M YYYY DD M YWY DD	* Reissue the said v	new bank detail	s and make payme	nt in new bank thro	ugh NEFT/RTGS.			
Address Nominee (Optional) Do MM YYYY					is Mandatory to proce	ss the application	on. (REGISTR	ATION /CHANGE
FOR NOMINATION OPT-OUT: INWe DO NOT wish to make a nomination. (Please tick (√) if the unit holder does not wish to nominate anyone) / We, the undersigned applicant(s)/unitholder(s) hereby confirm that I / we do not wish to appoint any nominee(s) in respect of the mutual fund application(sunits held in my / our mutual fund folio(s) and understand the implications / issues involved in non-appointment of any nominee(s) and am/ are further aware the case of my demise / death of all the unit holders in the folio, my / our legal heir(s) would need to submit all the requisite documents issued by the Court or subther competent authority, as may be required by the Mutual Fund / AMC for settlement of death claim / transmission of units in favour of the legal heir(s), basen the value of the units held in the mutual fund folio/s. K. INVESTOR(s) DECLARATION & SIGNATURE(s) //We have read and understood the contents of the Scheme Information Document(s)/Key Information Memorandum(s) & Statement of Additional Information(s) of Scheme(s) and agree to abide by the terms, conditions, rules and regulations of the Scheme(s) as on the date of this transaction. //We hereby declare and confirm that the information provided in this form is true and correct and is duly supported by the document proof enclosed along with the for case of non-submission of any of the documents or if the documents are not found to be in order, the AMC reserves the right to not register the application submit fine AMC/Mutual Fund shall not be liable and/or responsible for any loss or damage that I/we may incur if the Form is rejected." I/We interested in receiving promotion material from the AMC via mail, SMS, telecall, etc. If you do not wish to receive, please call on tollfree no. 18002100168.		Nominee	Birth of	Relation with	(in case Nominee	Relation with		Nominee / Guardian (in case Nominee
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