

TRANSACTION SLIP

For Existing Investors Only



DISTRIBUTOR INFORMATION			FOR OFFICE USE ONLY		
Name & ARN* / RIA Code / PMRN	Sub Broker Name & Code	EUIN	Register Serial No.	Date of Receipt	Time of Receipt
ARN-64917		E434563			

*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 distributors. In case purchase / subscription amount is Rs. 10,000 or more and the investor's Distributor has opted to receive "Transaction Charges" the same are deductible as applicable from the purchase / subscription and payable to the distributor. Units will be issued against the balance amount invested.

I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee / relationship manager / sales person of the above distributor / sub broker or not with standing the advice of in-appropriateness, if any, provided by the employee / relationship manager / sales person of the distributor / sub broker. #By mentioning RIA code (Registered Investment Adviser), I/we authorize you to share the investment Adviser details of my/our transactions in the scheme(s) of LIC Mutual Fund. By mentioning PMRN code (Portfolio Manager's Registration Number), I/we authorize you to share with the SEBI-Registered Portfolio Manager the details of my/our transactions in the scheme(s) of LIC Mutual Fund.

⊗ SIGN HERE First/Sole Applicant/Guardian/POA	⊗ SIGN HERE Second Applicant/POA	⊗ SIGN HERE Third Applicant/POA
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01. INVESTOR DETAILS (Mandatory)

Folio No.

First Applicant's Name FIRST MIDDLE LAST

02. ADDITIONAL PURCHASE

I/We would like to purchase units in the below mentioned scheme

Scheme Name:	SCHEME NAME	Plan Please tick (✓)	Direct	Regular
Option Please tick (✓)	Growth IDCW Incase of IDCW, Please tick (✓)	Payout of Income Distribution cum capital withdrawal option	Reinvestment of Income Distribution cum capital withdrawal option	

Amount (in Fig.): (in words):

Drawn on bank & branch:

Cheque/DD No / OTM UMRN. Date DDMMYY

Account No. Bank A/c type (please ✓) Savings Current NRO NRE FCNR

Mode of payment Please tick (✓) Cheque DD Fund Transfer RTGS/NEFT OTM

Investors desiring to get allotment of units in dematerialized mode instead of physical mode should provide the details in their demat account below. Ref. inst. 13.

03. DEMAT ACCOUNT DETAILS

NATIONAL SECURITIES DEPOSITORY LTD. (NSDL) CENTRAL DEPOSITORY SERVICES (INDIA) LTD. (CDSL)

Depository Participant Name: Depository Participant Name:

DPID No. I N Beneficiary A/c No.

Beneficiary A/c No.

04. SWITCH

I/We would like to switch all units OR Partial units OR Rs. (amount in fig):

(amount in words):

FROM SCHEME NAME TO SCHEME NAME

Plan Please tick (✓) Direct Regular

Option Please tick (✓)	Growth* IDCW Incase of IDCW, Please tick (✓)	Payout of Income Distribution cum capital withdrawal option	Reinvestment of Income Distribution cum capital withdrawal option
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*Default Option is Growth, incase of IDCW default is Reinvestment of Income Distribution cum capital withdrawal option

05. REDEMPTION

I/We would like to redeem all units OR Partial units OR Rs. (amount in fig):

(amount in words):

FROM SCHEME NAME TO SCHEME NAME

Plan Please tick (✓) Direct Regular

Option Please tick (✓)	Growth IDCW Incase of IDCW, Please tick (✓)	Payout of Income Distribution cum capital withdrawal option	Reinvestment of Income Distribution cum capital withdrawal option
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Redemption proceeds to be credited to the following bank A/c. registered under this folio*.

Bank/Branch Account No.

*Please specify the bank details in which you wish to receive the redemption proceeds. Kindly note that this bank account should be one of the registered bank account in the folio else by default the redemption proceeds will be credited into the default bank account. Also, this cannot be treated as change of bank mandate.

06. LEGAL ENTITY IDENTIFIER DETAILS

LEI No: Validity Period of LEI: DDMMYY

Legal Entity Identifier is mandatory for all non-individuals and it should be quoted in financial transactions of Rs.50 Crores and above routed through RTGS/NEFT w.e.f 1st April 2021.

07. DECLARATION & SIGNATURE

I/We have read and understood the contents of the Statement of Additional Information (SAI), Scheme information Document (SID), Key Information Memorandum (KIM) and addendum. I/We agree to abide by the terms, conditions, rules & regulations of the Scheme(s) as applicable from time to time. I/We confirm that the amount invested in the Scheme is derived through legitimate source.

Date : ⊗	⊗ SIGN HERE First/Sole Applicant/Guardian/POA Holder	⊗ SIGN HERE Second Applicant/POA Holder	⊗ SIGN HERE Third Applicant/Holder
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ACKNOWLEDGMENT SLIP

Folio No. (TO BE FILLED IN BY THE INVESTOR)

From Mr/Mrs/M/s. (Name of the investor)

Scheme LIC MF. Plan Option

Transaction (Please ✓) Purchase Switch Redemption

Please Note: Unit of allotment are subject to realisation of Cheque / Demand Draft / Payment Instrument.

Corporate Office: Industrial Assurance Building, 4th Floor, Opp. Churchgate Station, Mumbai - 400020. Tel.: 022-66016000 | Fax: 022-66016191 Website: www.licmf.com | Toll Free: 1800-258-5678

Register & Transfer Agents: KFin Technologies Limited, Selenium Tower B, Plot No 31 & 32, Gachibowli, Financial Dist, Nanakramguda, Serilingampally, Hyderabad -500 032. Tel.: 040-44677131-40 | Fax: 040-22388705 | Email ID: service_licmf@kfinetech.com Website: www.kfintech.com



ISC Signature, Stamp & Date