

COMMON TRANSACTION SLIP



ARN NO & NAME OF AMFI-REGISTERED MUTUAL FUND DISTRIBUTOR

ARN-33153 SRIKANTH V KULKARNI

EUIN NO

#72, 16TH CROSS, 34TH MAIN, J P NAGAR,
6TH PHASE, BENGALURU - 560076. MOB 9886327711

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.

1st Applicant's Signature

2nd Applicant's Signature

3rd Applicant's Signature

X

Investor's Details: EXISTING FOLIO NUMBER

NAME OF THE FIRST/SOLE APPLICANT _____ KYC YES - NO PAN NO _____
 NAME OF THE GUARDIAN [In case of minor] _____ KYC- YES -NO PAN NO _____
 NAME OF THE SECOND/APPLICANT _____ KYC - YES - NO PAN NO _____
 NAME OF THE THIRD APPLICANT _____ KYC - YES-NO PAN NO _____

ADDITIONAL PURCHASE:

SCHEME NAME.....PLAN.....OPTION.....
 Cheque/DD NO.....Cheque DD Date.....D D charge Rs.....Cheque/D D net Amount Rs.....
 Bank Name.....Branch.....City.....

REDEMPTION:

SCHEME NAME.....PLAN.....OPTION.....
 Amount Rs..... In Words.....Units []

SWITCH REQUEST.(SUBJECT TO LOCK IN PERIOD IF ANY)

SWITCH [] ALL CLEAR UNITS [] NO. OF UNITS.....
 Amount (in Rs).....(IN WORDS).....
 FROM SCHEME.....PLAN.....OPTION.....
 TO SCHEME.....PLAN.....OPTION.....

SIGNATURE VERIFICATION.

This is to verify the signature of SHRI/SMT.....A/CNO.....TYPE.....

IS AS FOLLOWS.....NAME OF THE BANK.....BRANCH.....

NAME OF VERIFYING OFFICER.....BANK'S SEAL>>>

BANK'S VERIFYING OFFICER'S SIGNATURE

I/we have read and understood the contents of the Scheme Information Document(s), Key Information Memorandum and Addendums issued of respective scheme(s). I/We hereby apply to the Trustee of Mutual Fund and agree to abide by terms and conditions, rules and regulation of the relevant scheme(s). I/We have neither received nor 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.

SIGNATURES:

1ST Applicant 2nd Applicant..... 3rd Applicant.....
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ACKNOWLEDGEMENT SLIP [to be filled by the investor]

Received from Mr/ Mrs..... Folio / Account no.....

[] Additional purchase [] Redemption [] Switch request [] Signature verification