COMMON TRANSACTION FORM

ARN: 122067 EUIN: E191655

| Name of the Mutual Fund: | |
|--|------------------------------------|
| Folio Number: | |
| Unit Holder Name: | Unit Holder PAN: |
| ADDITIONAL PURCHASE: I/We would like to purchase additional units or amount as per the following details: | |
| Scheme Name: | |
| Option: | |
| Cheque / DD No.: | Cheque / DD Date: DD / MM / YYYY |
| Bank & Branch: | |
| Amount (Rs.): | |
| REDEMPTION: I/We would like to redeem my/our units or amo | ount as par the following details: |
| | Junt as per the following details. |
| Scheme Name: | |
| Option: Amount (Rs.): | (or) Units: |
| Amount (NS.). | (OI) OTHES. |
| SWITCH: I/We would like to switch units or amount as per the following details: | |
| SWITCH FROM: | SWITCH TO: |
| Scheme Name: | Scheme Name: |
| Option: | Option: |
| Amount (Rs.): | (or) Units: |
| EMAIL ID CHANGE / UPDATION: | |
| E-Mail ID (New): | |
| CHANGE OF BANK MANDATE: | |
| Name of Bank (New): | |
| Branch Address: | |
| Account Number: | MICR: |
| Account Type: | IFSC / RTGS Code: |
| DISCLAIMER: | |
| Declaration: I/We would like to invest in Mutual Fund, subject to the terms of Statement of Additional Information and Scheme Information Document of the respective Scheme(s) and subsequent amendments thereto. I/We have read and understood, and is bound by the contents of the Statement of Additional Information and Scheme Information Document of the respective Scheme(s). I/We have not received nor been induced by any rebates or gifts, directly or indirectly in to making this investment. I/We accept and agree to be bound by the said terms and conditions including those excluding any sort of liability of AMC & ARN Holder. The ARN holder has also disclosed to me/us all the commissions payable to him/her/them for the different competing schemes of various Mutual Funds from amongst which this scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered / communicated any indicative portfolio and/or any indicative or assured yield by the respective Mutual Fund /its distributor for this investment. I/We are authorized to undertake this transaction and hereby declare that the particulars given on this form are correct and complete and express my willingness to undertake this transaction. Additional Declaration: I/We confirm that I/We are a resident of India. I/We confirm that, I am/We are Non Resident of Indian Nationality / Origin and I/We hereby confirm that the funds for subscription (all additional purchases) have been / will be remitted from abroad through normal banking channels or from funds in my/our NRE/NRO/FCNR Account. | |
| SIGNATURE: | |
| | |

Sole/ 1st Unit Holder 2nd Unit Holder 3rd Unit Holder