Common Transaction Slip

EUIN :

Broker Name & Code :

Date _____/_____/_____ AMC Name _____ Folio No_____
Name of Investor _____ Pan No _____
Scheme Name _____Options _____ / _____
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 distributer. ☐ Please make changes requested below in all folio under aforesaid PAN

☐ **ADDITIONAL PURCHASE**

I would like to purchase units of the above mentioned scheme for Amount in Rs._____ (in words) _____ Cheque/DD No _____ dated _____ drawn on _____ Branch _____ city _____

☐ **REDEMPTION REQUEST**

I would like to redeem _____OR _____ No of Units OR Rs. (in figure) _____ from the above mentioned scheme. I understand that if my balance is inadequate to meet the request, available units will be redeemed out.

☐ **SWITCH REQUEST**

I would like to switch Rs _____ (in words) _____ OR ALL Units OR No of Units _____ From above mentioned to scheme _____ Plan _____ Option : Growth/ Dividend payout / Dividend Re-investment

☐ **UPDATE /CHANGE IN BANK DETAILS**

Bank Name _____ **Branch** _____City _____
Bank Account No _____ **Account Type**: Savings/Current/NRE/NRO
MICRNo:_____ **NEFT/ IFSC No** _____
Direct Credit of Redemption / Dividend (Please) ☐ yes (if available for scheme/plan and with bank details provided above I/We authorize mutual fund to directly credit Redemption/Dividend proceeds in the following bank a/cs.If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information. I would not hold Mutual fund responsible.

☐ **CHANGE IN ADDRESS / CONTACT DETAILS**

NewAddress_____
_____City _____ State_____ Pin _____ Off Phone _____ Resi Phone_____ Mobile _____ Email _____ ☐ I wish to receive the account statement via e-mail instead of physical documents

☐ KYC Compliant (copy attached) Please make updations for all folio under the above mentioned PAN

☐ **NOMINATION**

Nominee Name : _____ Relation_____DOB if Minor _____ Name & Address of Nominee/Gaurdian_____

The ARN Holder has disclosed to me/us all the commission(in the form of trail commission or any other mode),payable to him from different competing scheme of various mutual funds from amongst which the scheme is being recommended to me/us

SIGNATURES

First Holder _____ Second Holder _____ Third Holder _____