

FINANCIAL TRANSACTION FORM (Use separate slips for each Financial Transaction) FOR EXISTING INVESTOR ONLY For Purchase/Redemption/Switch							
JAVAHAR.K.P.		Branch	h Code	Sub-Broker	Sub-Broke	r (E E035876)e	
APARNC10021/IE (C) Declaration for "execution-only" transaction (only where EUIN box is left blank			only for SBG) ARN Code		Code	Identification Number) Reference No.	
* 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 in-appropriateness, 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.							
Signature(s)	1st Holder/Guardian /Authorised Signatory 2n			l Holder		3rd Holder	
Folio No.					Tax Status		
Name of Investor					Mode of Hold	ling	
PAN / PEKRN	1st Holder/Guardian 2nd			l Holder		3rd Holder	
KYC Status	1st Holder/Guardian 2nd			l Holder	3rd Holder		
Any alterations / correct	rections made on the Transaction slip needs to be counter signed by the unit holder(s).						
ADDITIONAL PURCHASE SWITCH							
Scheme Name				From Scheme			
Plan	Regular Direct			Plan	Regular	Direct	
Option	Growth DDCW (Dividend)			Option	Growth	DCW (Dividend)	
	Daily Weekly Fortnightly Monthly		Nonthly			Daily Weekly Fortnightly Monthly	
	Quarterly	Half Yearly Annu	ually			Quarterly Half Yearly Annually	
IDCW Facility	Payout Reinvest			No. of Units/ Amount		Units OR All Units OR	
Mode of Payment	☐ Cheque/DD ☐ RTGS/NEFT ☐ OTM			Amount		(Amt. in Rs.)	
Amount	(Amt. in Rs.)			T 6.1		Amount in Words	
	Amount in Words			To Scheme	Desules	Direct	
Cheque/DD/RTGS/ NEFT/OTM Ref. No.	Date			Plan	Regular Growth	Direct IDCW (Dividend)	
Bank A/c No.	Date			Орион	Growth	Daily Weekly Fortnightly Monthly	
Bank Name						Quarterly Half Yearly Annually	
Branch Name				IDCW Facility	Payout	Reinvest	
REDEMPTION				SIGNATURE(S)			
Scheme Name				I/We have read & understood the contents of the Scheme Information Document, KIM and Addendum(s) of the respective Scheme(s) and agree to abide by the Terms & Conditions, Rules & Registrations as applicable from time to time. Please sign as per mode of holding in Folio.			
Plan	Regular Direct						
Option	Growth DCW (Divid			r lease sign as per mode of nording in rollo.			
	Daily Weekl	y Fortnightly M Half Yearly Annu	Monthly ually	Signature of 1st Applicant/Guardian/Authorised Signatory			
No. of Units/	Units (·	-				
Amount		(Amt. in	ı Rs.)				
Redemption Payout Bank	To my Default Bank account Registered in the Folio OR To the following other Bank account Registered in the Folio			Signature of 2nd Applicant			
(Payment will be made only to the Registered Bank	Bank Name/Branch			Signature of 3rd Applicant			
account)	Bank Account Number						
Date: Place:							
ACKNOWLEDGEMENT							
Folio No. Investor Name							
Scheme Name			Plan	Regular Dir	ect Optio	n Growth IDCW	
Additional Purchase			Rede	emption		Switch	
Cheque Details			No of Units			To Scheme Name	
Δη		Amount (Rs.)			Units/Amount (Rs.)		