| REDEMPTION REQUEST |     |           |   |  |  |
|--------------------|-----|-----------|---|--|--|
|                    |     |           | _ |  |  |
|                    | ARN | NI - 0155 |   |  |  |

|   |   | ARN  | NJ - 0155   |
|---|---|--|---|
|   |   | Sub Br. code   |   |
| AMC Name:   |   |  |   |
| Folio Number:   | PAN   | Ī  |   |
| Investor Name:  |   |  |   |
| wish to redeem:   | Units <b>OR</b> Rs :  |  |   |
| Rupees (in words):  |   |  |   |
| From Scheme:  |   |  |   |
| Plan & Option :   |   |  |   |
|   |   |  |   |
| Bank details Verified ? <b>Yes [ ]</b> (Co  | ompuisory to check the bank detai   | is before subm   | ission of redemption)   |
| If multiple banks are registered in the fo  | olio , then mention any one bank  | detail below f   | or redmption payout.  |
|   |   |  |   |
|   |   |  |   |
| Declaration: Upfront commission be paid directly of various factors like service rendered by the trail commission or any other mode.), Payable the scheme is being recommended to me/us | ctly by the investor to the AMFI registered<br>e distributor. The ARN holder has disclose<br>to him for the different competing sch | d Distributors base<br>sed to me/us all the<br>emes of various N | ed on investors' assessment<br>ne commissions ( in form of<br>Mutual Funds from amongst |
| Signatures:   |   |  |   |
| First holder  | Second holder   |  | Third holder  |
|   |   |  |   |
|   |   |  |   |
|   |   |  |   |
|   |   |  |   |
|   | Toor  |  |   |
| <br>REDEMPTION REQUEST : Acki   |   |  |   |
| To be filled by Sub distributor / investor.   |   |  |   |
| Bank details Verified ? Yes [ ]   |   |  |   |
| Investor Name :   |   |  |   |
| Folio no :  |   |  |   |
| Scheme Name :   |   |  |   |
| Units / Amount :  |   |  |   |
| omes / milouit  |   |  |   |

Sub distributor Code : \_\_\_\_\_