

# Transaction Form



Please refer to the general instructions for assistance and complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink

Time Stamp

Distributor Code <b>ARN- 85723</b>	Sub-Distributor ARN	Branch Code	Relationship Manager's Name			EUIN <b>E098968</b>
	Sub-Distributor Code		Mobile +91-			
			E-mail			

Initial Commission will be paid by the investor directly to the distributor, based on assessment of various factors including the service rendered by the Distributor.

Investor's declaration where EUIN is not furnished.

I/We herby 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 the 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.

(Sole/First Applicant/Guardian)

(Second Applicant)

(Third Applicant)

## 1. APPLICANT INFORMATION

Name of Sole/1st Unit Holder  First Name  Middle Name  Last Name  Folio No.

PAN  First Unit Holder  Second Unit Holder  Third Unit Holder

KYC is mandatory. Please enclose a copy of KYC acknowledgement letters for all applicants.

## 2. CONTACT DETAILS OF SOLE/1ST UNIT HOLDER

Mobile No. +91-  E-mail ID

## 3. ADDITIONAL PURCHASE (Please ensure that the cheque complies to CTS 2010 standards)

Scheme Name  L&T

Option  Growth\*  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly  Quarterly

Investment Mode  Cheque/DD/Pay order No   RTGS/NEFT/Online Transfer/Fund Transfer

Amount (in ₹):  Drawn on:  Cheque/DD/Payment Instrument No.

Payment made by  First/Second/Third Unit Holder  Guardian  Others

## 4. SWITCH

Scheme Name  L&T

Option  Growth  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly  Quarterly

To Scheme  L&T

Option  Growth\*  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly\*  Quarterly

Please tick any one  Amount (₹)  OR  No. of units  OR  All Units

## 5. REDEMPTION

From Scheme  L&T

Option  Growth  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly  Quarterly

Please tick any one  Amount (₹)  OR  No. of units  OR  All Units

If the bank account has been changed and not been intimated to us, the proceeds will be credited to the bank account registered with us.

IFSC Code of the registered bank account for electronic payment  (Please enclose an original cancelled cheque leaf) If you have multiple bank accounts registered with us and wish to receive the proceeds in a registered bank account other than your default account please provide the below details. Please note that the proceeds will not be paid out to an unregistered bank account.

Name of the bank  Account No.

## 6. SYSTEMATIC WITHDRAWAL PLAN (SWP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000

From Scheme  L&T

Option  Growth  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly  Quarterly

Withdrawal preference  Amount (₹)  OR  Capital Appreciation (Available for GROWTH plan only) **Withdrawal frequency**  Monthly\*  Quarterly

Withdrawal date  1st  5th  10th\*  15th  25th **Withdrawal period** From  To  OR  Till balance

## 7. SYSTEMATIC TRANSFER PLAN (STP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000

From Scheme  L&T

Option  Growth  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly  Quarterly

To Scheme  L&T

Option  Growth\*  Dividend Reinvestment  Dividend Payout **Dividend Frequency**  Monthly\*  Quarterly

Transfer preference  Amount (₹)  OR  Capital Appreciation (Available for GROWTH plan only) From  To  OR  Till balance

Transfer frequency  Monthly\*  Weekly  Mon\*  Tue  Wed  Thu  Fri  Fortnightly  1st  15th\*  Quarterly  1st  5th  10th\*  15th  25th

\*Default option if not selected

## 8. DECLARATION & SIGNATURES

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. I/We understand that the upfront commission will be paid directly by me/us to the AMFI registered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed the commissions to me/us (in trail commission or any other), payable to him for different schemes of mutual funds from amongst which the scheme is being recommended to me/us

Date

(Sole/First Unit Holder)

(Second Unit Holder)

(Third Unit Holder)

## ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)



Folio No.  Received from  Name of the Sole/First Unit Holder

Scheme/Plan/Option

Additional Purchase

Amount (in Rs)  Drawn On  Cheque/DD/Payment Instrument No.

Switch Request

Please tick any one  Amount  OR  No. of units  OR  All Units

Redemption Request

Please tick any one  Amount  OR  No. of units  OR  All Units

SWP Instalment amount  Frequency  Monthly  Quarterly

STP Instalment amount  Frequency  Monthly  Quarterly  Weekly  Fortnightly

For Office Use Only

Acknowledgement Stamp & Date