



SYSTEMATIC TRANSACTION FORM (PDC SIP/STP/SWP)

and only
India's 1st Direct to Investor
Mutual Fund

505, Regent Chambers, 5th Floor, Nariman Point, Mumbai - 400021. www.QuantumMF.com

Please fill this form in ENGLISH in BLACK/DARK COLOURED INK in CAPITAL LETTERS.

| 1 INTERMEDIARY INFORMATION | | | (FOR OFFICE USE ONLY) |
|----------------------------|-----------------|---------|-----------------------|
| Name & ARN Code | Sub-Broker Code | EUIN | E-Code |
| 85723 | | E098968 | |

Please refer instruction No. 4 for EUIN. Please read the instructions carefully, before filling up the application. Fields marked with (*) are mandatory.

| 2 NEW / EXISTING UNIT HOLDER INFORMATION | |
|--|---------|
| Folio / Application No. | PAN No. |
| Name of the Sole/1st Applicant | |

| 3 SCHEME DETAILS (Please ✓) | |
|--|--|
| <input type="checkbox"/> Quantum Long Term Equity Fund <input type="checkbox"/> Quantum Equity Fund of Funds <input type="checkbox"/> Quantum Tax Saving Fund | <input type="checkbox"/> Quantum Liquid Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Daily Dividend Reinvestment Option <input type="checkbox"/> Monthly Dividend Payout Option <input type="checkbox"/> Dividend Transfer to Scheme - _____ (Available only for Monthly Dividend Payout Option) |
| <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Reinvestment Facility <input type="checkbox"/> Dividend Option <input type="checkbox"/> Dividend Payout Facility | <input type="checkbox"/> Quantum Gold Savings Fund - Growth Option <input type="checkbox"/> Quantum Multi Asset Fund - Growth Option |
| <input type="checkbox"/> Quantum Dynamic Bond Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Monthly Dividend Reinvestment Option <input type="checkbox"/> Monthly Dividend Payout Option | |

| 4 FREQUENCY DETAILS (Please ✓) | | | | |
|--------------------------------|---------------------------------|---|---|---|
| <input type="checkbox"/> Daily | <input type="checkbox"/> Weekly | <input type="checkbox"/> Fortnightly | <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly |
| All Business Days | 7th, 15th, 21st, 28th of a week | <input type="radio"/> 5th, 21st OR <input type="radio"/> 7th & 25th | <input type="radio"/> 5th OR <input type="radio"/> 21st | <input type="radio"/> 7th OR <input type="radio"/> 25th OR <input type="radio"/> 15th OR <input type="radio"/> 28th |

| 5 SYSTEMATIC INVESTMENT PLAN (SIP) DETAILS (Please ✓) | | Post Dated Cheque (PDC's) |
|--|--|---|
| Regular SIP <input type="checkbox"/> | Change in Bank Mandate for existing SIP <input type="checkbox"/> | Micro SIP (MSIP) <input type="checkbox"/> |
| Enrollment Details | | |
| No of Installments: | Amount Per Installment: _____ Amount (in words) _____ | |
| 1st Installment Cheque Details | | |
| Cheque/DD _____ | Date _____ | Amount (Rs.) _____ |
| Drawn on Bank & Branch _____ | | |
| Photo Identification proof and Residential Proof number in case of Micro SIP of 1st Applicant _____ | | |
| 2nd Applicant _____ 3rd Applicant _____ | | |
| Cheque Nos From _____ To _____ # Only monthly & quarterly SIP frequencies are available for Quantum Liquid Fund. | | |

| 6 SYSTEMATIC TRANSFER PLAN (STP) DETAILS (Please ✓) | | (Please allow 10 days to register STP) |
|---|---|--|
| To Scheme _____ | Plan _____ Option _____ | |
| No of Installments: _____ | Amount Per Installment: _____ Amount (in words) _____ | |

| 7 SYSTEMATIC WITHDRAWAL PLAN (SWP) DETAILS (Please ✓) | | (Please allow 10 days to register SWP) |
|---|-------------------------|--|
| Amount Per Withdrawal: _____ | Amount (in words) _____ | |
| No of Installments: _____ | | |

| 8 CONTACT DETAILS | |
|-------------------|-------------------------|
| Email ID _____ | |
| Mobile No. _____ | Tel. No. STD Code _____ |

DECLARATION AND SIGNATURES

I/ We have read and understood the terms and contents of Statement of Additional Information (SAI), Scheme Information Document (SID) of the scheme(s), I/We hereby apply to the Trustees of Quantum Mutual Fund for units of scheme(s) of Quantum Mutual Fund as indicated above and agree to abide by the terms, conditions, rules and regulations of the scheme (s). I/We hereby declare that the particulars given herein are correct and complete. I/We confirm that I/we have not received and will not receive any commission or brokerage or any other incentive in any form, directly or indirectly, for subscribing to units issued under any of the scheme(s). I/We hereby declare that the amount invested in the scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of Income Tax Act, 1961, Prevention of Money Laundering Act, 2002, Prevention of Corruption Act, 1988 or any other applicable laws enacted by the Government of India from time to time.

For Micro SIP investors- I/we hereby declare that the I/we do not have any existing Micro SIP's which together with current application will result in aggregate investments exceeding ₹ 50,000 in a financial year.

For NRIs/FCIs only: I/We confirm that I am/we are Non Residents of Indian Nationality/origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our Non-resident External Account/FCNR account/NRO/NRSR/NRNR account/NRO/NRSR Account. (Including amount of transactions made in future)

Repatriation Non Repatriation

1st Applicant

2nd Applicant

3rd Applicant

To be sign by all Applicants if mode of holding is joint

To be sign by all Applicants if mode of holding is joint

To be sign by all Applicants if mode of holding is joint