

ARN-97821

## Request Form Registration of new nomination / Cancellation of existing nomination / No nomination

BNP Paribas Mutual Fund					
I / We like to (i) nominate OR (ii) amend the existing no	mination as partho following data	ile in the above mentioned fo	and		hereby
I/We wish to make a nomination and do he respect of units held by me / us in the said any.	reby nominate the following person	on(s) more particularly descri	bed hereund	er in whom all rights ar	
Name & Address of the Nominee (s)	Date of Birth [DD-MMM-YYYY]			Signature of the Nominee	Relationship with Applicant
* If the percentage allocation is not mentioned	or is left blank then the AMC shal	l apply the default option of e	equal distribu	tion among the multipl	e designated Nominees
In case above Nominee(s) is/are minor, please  Nominee No.	provide the following information	ı:		nature of the Nomin	-
		ı:			-
Nominee No.		ı:			-
Nominee No. Nominee 1		ı:			-
Nominee No.  Nominee 1  Nominee 2  Nominee 3  I/We do not wish to make a nomination. I hereby understand that every new nomination	Name and Address of the	e Nominee's Guardian			-
Nominee No.  Nominee 1  Nominee 2  Nominee 3  I/We do not wish to make a nomination. I hereby understand that every new nomination. Signatures [to be signed by all Holders in the signed by all the signe	Name and Address of the	e Nominee's Guardian			-
Nominee No.  Nominee 1  Nominee 2  Nominee 3  I/We do not wish to make a nomination. I hereby understand that every new nomination	Name and Address of the	e Nominee's Guardian			-