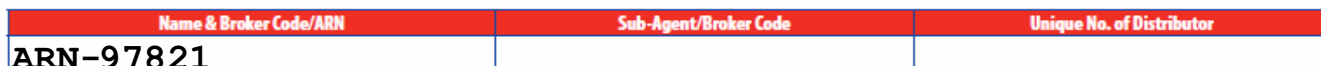


Please attach the scheme application form duly filled & signed



☐ **New Regular SIP:** First Installment of Regular SIP through a Cheque and subsequent investments via Electronic Clearing Services (ECS) (for all Banks in select cities only) / Direct Debit (for select Banks only) as per overleaf.

☐ **New Special SIP:** First & subsequent installments of Special SIP via ECS or Direct Debit. Application should be submitted at least 30 days before the 1st SIP installment.

☐ **Renewal/Continuation of existing SIP** only if last SIP installment as per current registration is not yet over (pls fill fresh details in following columns).

Folio No. (for existing unitholders)		Application No. (for new Applicant)	
---	--	--	--

Name of Sole/1st Applicant/Minor/Non-Individual Mr./Ms./M/s.

E-mail ID (Capital Letters): _____ Mobile No.: [] [] [] [] [] [] [] []

Scheme :	IM	Plan :		Option	
----------	----	--------	--	--------	--

SIP Installment Amount (Rs.)

--	--	--	--	--	--

Frequency (please tick any one) : Monthly * ☐ Quarterly ☐ (* Default Frequency)

SIP Period : Start:

M	M	Y	Y	Y	Y
---	---	---	---	---	---

 End:

M	M	Y	Y	Y	Y
---	---	---	---	---	---

 OR Perpetual (i.e. until it is cancelled)

--

SIP Dates (Pl. 3 any one): ☐ 01st ☐ 05th ☐ 10th ☐ 15th ☐ 20th ☐ 25th of the month (**Note:** Minimum 30 days are required for 1st installment through auto debit to register and start)

"The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us".

The Branch Manager

Bank Name & : _____

Address : _____ **PIN Code**

--	--	--	--	--	--

Bank Account Number :
Account Type : ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR

9-digit MICR Code (Mandatory) :

--	--	--	--	--	--	--	--	--

 (At PAR MICR Code not valid for ECS - e.g MICR code starting and / or ending with 000)

☐ Blank Cancelled Cheque ☐ Copy of Cheque

This is to inform you that I/we the bank account holder/s have registered with JM Financial Mutual Fund through their authorised service provider for the RBI's Electronic Clearing Service (Debit Clearing)/Direct Debit Facility and that the payment towards the above investment in JM Financial Mutual Fund shall be made from my/our above mentioned account with above bank & branch. Further, I/we authorize the representative carrying this ECS/Direct Debit/Standing Instruction mandate to get the same verified and executed. I/We hereby authorize you to debit my/our account for making payment to JM Financial Mutual Fund through AUTO DEBIT (through Electronic Clearing Service / DIRECT DEBIT for collection of SIP payments.) as per the details furnished as above.

For Auto Debit (Direct Debit) cases – In case, the SIP is not considered as a valid SIP by the JM Financial AMC as per the provisions of the scheme at any point of time during the currency of SIP, I/we authorise them to cancel/stop my/our subsequent SIP installments. I/We, also authorize you to cancel my/our SIP mandate on receipt of such a request from JM Financial AMC to stop debiting my/our account for subsequent installments.

		Name/s & Signature/s in Order & mode of operation as per Bank's Records	Name /s & Signature/s in Order & mode of operation as per JM Financial Mutual Fund's records
First/Sole holder	Signature		
	Name		
Second Holder	Signature		
	Name		
Thirld Holder	Signature		
	Name		

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place: _____

Recorded on	<input type="text"/>	Scheme Code	<input type="text"/>
Recorded by	<input type="text"/>	Credit Account Number	<input type="text"/>
Bank Mandate Ref. No.	<input type="text"/>	Investor Ref. / Follo No.	<input type="text"/>

[illegible]