EUIN-E113814 ARN-2256

5. INVESTMENT DETAILS (Refer instruction no	. 4 on page 58)							
Scheme name: JPMorganPlanPlan								
Option (Please ✓) ○ Dividend reinvestment (default) ○ Dividend payout ○ Dividend ○ Growth ○ Daily* ○ Weekly* ○ Fortnightly* ○ Monthly* ○ Yearly* ○ Bonus* ○ Annual Dividend* *as applicable								
6. PAYMENT DETAILS (Refer instruction no. 5 of	on page 58)							
6A. INITIAL INVESTMENT (Please note that inve	estors have to fill out separate common application		vestments)					
Cheque / DD no.		Drawn on bank/						
Cheque / DD date D D	M M Y Y Y	Branch name	0.5.1.0.5.0.5.0.5.0.5.0.5.0.5.0.5.0.5.0.					
Amount of cheque / DD in figures (₹) (i)		Account type (Please ✓)	Savings Current NRE NRO FCNR					
DD charges, if any, in figures (₹) (ii) Total amount in figures (₹) (i) + (ii)		Relationship with beneficiary (Third party payment)						
Rupees in words		(Tillid party payment)						
6B. SYSTEMATIC INVESTMENT PLAN (SIP)	Pefer terms and conditions on page 64 and instru	ctions for SIP on page 68)	○ Please ✓ for MICRO SIP					
	ment period Dates		15th 25th All dates (for ECS facility only) (default as per SID)					
	Cheques (Please provide the details below)		lease complete the application form for ECS debit facility)					
First SIP transaction via Cheque no.	Cheque date		Y Y Amount (₹)					
Instalment amount (₹)	No. of instalments	D D 101 101 1 1	Total Amount (₹)					
Subsequent instalment From	From		From					
cheque nos. To To			To					
Cheques drawn on Name of bank		Branch						
7. DEMAT ACCOUNT DETAILS OF FIRST / JOI	NT APPLICANT(S) (Refer Instruction 7)							
Depository Participant (DP) ID	Beneficiary Account Number	Depository Par	rticipant (DP) ID & Beneficiary Account Number					
NSDL ()		SL ()						
	g (joint / anyone or survivor) in case of joint hold		case of valid demat account details provided, the bank linee details as per the demat account shall prevail over					
1 0 1		of a minor						
8. NOMINATION* DETAILS (Nominations will n			o understand that all payments and settlements made to					
such nominee and signature of the nominee acknowl	edging receipt thereof, shall be a valid discharge	by the AMC / Mutual Fund / 1	rustees.					
Tick here if you do not wish to nominate ^								
Name of the nominee			Date of birth (if nominee is minor)					
Mr. Ms. M/s.			D D M M Y Y Y					
Address of nominee (Please provide full address)			1					
			Pin code					
Name of the guardian (If nominee is minor)			Pin code					
Name of the guardian (If nominee is minor) Address of guardian			**************************************					
			Relationship with nominee					
	Pin code		Relationship with nominee					
Address of guardian * For multiple nominations please ensure that the sa			Relationship with nominee Signature of guardian (mandatory) / nominee (optional) Daper, with all the investors' signatures.					
Address of guardian * For multiple nominations please ensure that the sa ^ Please note that if you do not tick the box nor furni	me details given in this nomination section are se ish any nomination details, it is deemed to be assi	med that you do not wish to	Relationship with nominee Signatureofguardian(mandatory)/nominee(optional) Daper, with all the investors' signatures. nominate anyone.					
Address of guardian * For multiple nominations please ensure that the sa	me details given in this nomination section are se	Total No. of enclos	Relationship with nominee Signatureofguardian(mandatory)/nominee(optional) Daper, with all the investors' signatures. nominate anyone.					
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(We have neither received nor been induced by any rebate or gifts, directly in for any of its delegates or service providers) to collect, process, store and tran helvs, for (a) processing, maintaining, administering, verifying my / our account in to IPMorgan Mutual Fund 5 or its investment Manager's associates/group comy or of any dhange in the particulars provided by me / us in this application form. itizable laws and regulations, including without limitation, those relating to markes incent Manager shall not be held responsible to the me / us or any other person issuent on any other mode), payable to him for the different competing Schemes or sesult in aggregate investments exceeding ₹ 50,000 in a year. I hereby declare the order contents of improper match or difference in the signatures, investor SIGN Second applicant	Total No. of enclos No. to be filled by applicant at I am / We are Non-Resident(s) of Indian natid through approved banking channels or from ment. 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JPMorgan Mutual Fund

Note: All future communications in connection with this application should be addressed to the nearest JPMorgan Customer Service Centre, quoting full name of the first applicant, the application serial number, the name of the Scheme, the amount invested, date and the place of the Customer Service Centre where the application was lodged.

Asset Management Company

See Management Company

J. P. Morgan Asset Management India Private Limited
J. P. Morgan Tower, Off C.S.T. Road, Kalina, Santacruz (East), Mumbai - 400 098. Tel.: 022 - 6157 3000 Fax: 022 - 6157 4170

E-mail: end_investors@jmorgan.com Toll free no.: 1-800-200-5763 (JPMF)

Computer Age Management Services Private Limited, Unit: JPMorgan Mutual Fund, 3rd Floor, Rayala Towers, 158, Anna Salai, Chennai - 600 002.

E-mail: end_jpm@camsonline.com