

 $Form \ For \ Nomination / Cancellation \ Of \ Nomination \\ (\text{To be filled in by Individual(s) applying for / holding units singly or jointly. A maximum of 3 nominees can be registered for a Folio). (Please read instructions overleaf carefully before filling the form)$

	To, Religare Invesco Mutual Fund 3rd Floor, GYS Infinity, Paranjpe 'B' Scheme, Subhash Road, Vile Parle (East), Mumbai - 400 057.																			
	Folio Number I/We, 1st Holder																		do hereby nominate the per	son/person(s)
	2nd Holder																		more particularly described cancel the nomination mad	hereunder
	3rd Holder																		the day of _	
1.	Details of the 1st Nom	ninee.																	in respect of the units.	
	Nominee Name																			
	Address																			
	City									PIN										
	Relationship							Date (for an	of Birt	h	D	D	M	M	Υ	Υ	Υ	r	% Share	
	If nominee is a minor, Name & Address of Guardian							(0.21												
	Specimen Signature of Nominee/Guardian																			
2.	Details of the 2 nd Non	minee	ذ																	
	Nominee Name																			
	Address																			
	City									PIN										
	Relationship							Date (for a n	of Birt	h	D	D	М	M	Υ	Υ	Y	r	% Share	
	If nominee is a minor, Name & Address of Guardian																			
	Specimen Signature of Nominee/Guardian																			
3.	Details of the 3 rd Non	minee	!																	
	Nominee Name																			
	Address																			
	City									PIN										
	Relationship							Date (for an	of Birt ninor)	h	D	D	М	M	Υ	Υ	Υ	ľ	% Share	
	If nominee is a minor, Name & Address of																			
	Guardian																			
	Specimen Signature of Nominee/Guardian																			
tate hen o m avoi	hereby nominate the above nominee/nominee d above, in the event of my/our death. Furnishin, ominee(s) furnishing proof of guardianship inc y/our credit, execution of Indemnity Bond or ur of and to the satisfaction of Religare Invesc	ngofthedea rcasethenor r such other co Mutual F	athcertific minee(s) is r documer und (RIMF	ate byway o s/area mino nts as may b F), Religare I	of proof o or, acknow be requir Invesco A	fmy/our rledging ed from ksset Ma	rdeath, sig receipt of the nom anagemer	ynature of famounts inee(s) in nt Co. Pvt.	s/ə	ıst	Appli	icant	:							
RIAM suffe RIAM osse	(RIAMC) and transfer of units in favor of Non for towards my/our estate, legal heirs, executo er any losses or any claim, demand, liabilities, p fC in respect of or in connection with the non se, expenses, costs and charges that RIMF or RI have read the rules and instructions on nom	tors, adminis proceedings omination, R RIAMC may:	strators ar s or action IIMF or RIA suffer or ir	nd successons are filed of AMC shall be nour, from r	ors. IFRIN or made « se entitles my/our es	MF or RIA or initiat d to be in state.	AMC were ted agains ndemnifie	e to incur, at RIMF or ed for any	ignature/s	2nd	d App	lican	it							
com	ply and adhere to such rules or any amendme	ents that ma	sy be made	e from time	to time.	-a give	e.y a	ormanii LO	S	3rd	Арр	licant	t							