## TO BE USED FOR ALL SCHEMES EXCEPT TATA RETIREMENT SAVINGS FUND

TRANSACTION SLIP
Investment Manager: Tata Asset Management Limited Trustee: Tata Trustee Company Limited
Toll Free: 1800 - 209 - 0101, Fax: (022) 66315194, Email: kiran@tataamc.com, Website: www.tatamutualfund.com
\* To be filled in BLOCK LETTERS (Please strike off section(s) that is (are) not applicable)



BROKER / AGENT CODE			SUB-BROKER / BANK BRANCH CODE						SUB-BROKER ARN CODE								EUIN CODE								
ARN-97821																	E113814								
Upfront commission shall be pa																									
We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor & the distributor has not charged any advisory fees on this transaction. (Refer instruction 14 & 15)																									
															i or the										
Folio Number:																ate:							_		
e-mail → (IN CAPITAL) (Refer Inst. 16)																									
DEMAT ACCOUNT DE case Unit holders do not prov	vide their Dem	nat Aco	ount d	letails,	, an ac	count st	atement sha	l be sent	t to the	m. Such	inve	stors	will not	be ab	le to	trade	on the	stock	exch	ange. (	(Refer	ticip	ant). In t 13)		
NATIONAL SECURITIES DEPOSITORY LTD. (NSDL)  Depository Participant Name:								_	riton					ORY	SEI	KVIC	ES (INI	DIA) I	LID.	. (CD:	SL)				
	N N							Depository Participant Name:																	
Beneficiary A/c No.	IN .								Beneficiary A/c No.																
INVESTOR DETAILS: PAN AND KYC COMPLIANT STATUS DETAILS (MAND.													ATC	\DV\											
	Name									PAN Number								KYC Compliant Status (please attach							
															_	proof). Refer Instruction 4.									
First Applicant/Guardian*								$\perp$							☐ Yes										
Second Applicant														┸					Yes						
Third Applicant																				Yes	į.				
*If the First Applicant is a Minor, then please state the details of Guardian. Please attach PAN proof.																									
ADDITIONAL PURCHASE REQUEST																									
Scheme										Plan							Optio	n							
Gross Amount in ₹				D	D C	harges	₹ (if any)						Net A	moui	nt ir	n₹									
₹ (in Words)																									
Account No.				C	hequ	ue/DD I	No.						Dated	ł											
						SW	VITCH RE	QUES	T (Re	efer Ins	truc	tion	7)												
From Scheme										Pla	เก						Option	1							
From Scheme								PlanPlanPlanPlanPlan																	
No. of Units	or	Amou	unt (₹	5				Amoun	t (in V	Vords)							- '								
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Scheme							KEDE	METI	ON	EQUE	31														
		Α		P					- /:- 1	_Plan_						—	Option_								
	or																								
For investors who have				_													ction i	fnot	use	d) Re	fer In	st. I	0 &11		
The redemption should be processed into the following bank account as per the payout mechanism indicated by me/us:  Name of the Bank:																									
																) l-	Cina								
												nk City:													
Important Note: If the bank account mentioned above is different from those already registered in your folio OR If the bank account details are not filled above, the redemption will be processed into the "Default" bank account registered for the aforesaid folio.														t Illied											
The Trustee, Tata Mutual Fund a) Having read & understood the co	ontents of the Sci	heme In	format	ion Do	cumer	nt of the Sc	heme, Switch-	in Scham	e. J/W	hereby:	polv (	for un	its of the	scheme	8.2	ree to	abide by	the ten	ms.c	onditio	ns, rule	& re	gulations		
governing the scheme.																							_		
I/We hareby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt of India from time to time. I/We are understood the details of the scheme & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Clent" process is not completed by me/u to the satisfaction of the AMC. I/We hereby authorise the AMC. I/We hereby authorise the AMC confirm that the Scheme, in favour of the applicant at the applicable IAW prevailing on the date of which are the satisfaction of the AMC. If We have required by the Law. b) For IMRIst I/We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I/We have remitted funds														e & I/We ir Client" ie date of											
from abroad through approved bank	king channels or f	from fun	nds in m	y/our	Non-R	Resident Ex	ternal / Non-R	esident O	rdinary.	c) The A	RN ho	olderh	as disclos	ed to m	ne/us	all the	commissi	ions (in	the fo	orm of to	rail com	missio	on or any		
other mode), payable to him for the are true & correct. e) I/We have rea															I/ VVG	confin	m that de	italis pri	ovide	d by me	// us in t	his ap	plication		
Signature(s)																									
/ Thumb Impression																									
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Folio	me						O <sub>F</sub>	ARN-97821 Option								For office use Signature of  TATA MUTUAL FUND									
Received from Mr./Ms. receiving authority.												hat's trusted													
Additional Purchase:	₹	c	heque	e/DD	No			dated		dn	awn	on_													
☐ Redemption ☐	Switch: An	nount	t (₹) _				₹ in words									.	Date = 1	P							
OR Unit												$\vdash$	Date of Receipt:												

Current Load structure enclosed