TRANSACTION SLIP Folio No. PAN KYC Status Name Primary Holder Mode of Holding 2nd Holder Bank Details 3rd Holder Financial Advisor : ARN-97821 Sub Financial Advisor: Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor Scheme Name Nature of Transactions : (Please tick & fill up relevant details) Purchase / Additional Purchase: I/we would like to purchase units of the above mentioned scheme for Amount ₹ (in fig) (in words) Cheque/DD Number dated Drawn on Branch Bank A/c type (Please tick) Savings Current NRO NRE Switch: /we would like to switch All units or of Partial units units or ₹ (amount in rupees) (in words) from above mentioned Scheme to Plan Scheme Option Dividend Payout Growth Dividend Re-Invest Redemption: I/we would like to redeem All units or of Partial units units or ₹ (amount in rupees) from above mentioned Scheme / Fund I/We furnish MICR & IFS code to facilitate electronic payments. (in words) MICR NO FSC

"I'We have read and understood the contents of the Offer document" and addenda issued till date and apply to the Trustee of UTI Mutual Fund as indicated above. I' We agree to abide by the terms and conditions, rules and regulations of the scheme as on the date of investment, I' We undertake to confirm that the applicant/unit holder is empowered to invest' disinvest and the signatories have necessary authorization to investidisinvest on behalf of applicant/unit holder. I'We undertake to confirm that this investment has been duly authorized by appropriate authorities in terms of all relevant documents and procedural requirements, I' We have not received nor been induced by any rebate or gifts, directly or indirectly in making investment, "I' We confirm than we are Non residents of Indian Nationality! Origin and that the funds are remitted from abroad through approved banking channels or from my/ our funds from my/ our NRE/ NRO account. If We undertake to provide further details of source of funds and any such other relevant document, if called by UTI Mutual Fund. "Appliable to NRIs."

The ARN holder has disclosed to me/us all the commissions (in the form of trial 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.

SIGNATURE(S) First Account Holder Second Account Holder Third Account Holder