

# Aditya Birla Sun Life Mutual Fund



# ADITYA BIRLA CAPITAL

## COMMON TRANSACTION FORM (Only for Existing Corporate Investor) (PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM.)

Distributor Name / ARN No. / RIA No.	Sub Broker Name / ARN No. / RIA No.	Sub Broker Code	Employee Unique ID. No. (EJIN)	ARN Declaration - 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.
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Please sign below, in case the EJIN is left blank/not provided: I/We hereby confirm that the EJIN 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 and the distributor has not charged any advisory fees on this transaction. (refer inst no. A-4) [To be signed by all applicants, if mode of holding is joint]

Signature	First Unitholder / Authorised Signatory	Second Unitholder	Third Unitholder
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FOLIO NUMBER (Mandatory) :	Date : D D M M Y Y
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Investor Name:	
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PAN / PEKRN (Mandatory)	LEI No:	Valid Up to: D D M M Y Y Y Y
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(Mandatory for transaction amount of ₹50 crs & above for Non-Individual & HUF. Refer Instructions Section D.)

<input type="checkbox"/> ADDITIONAL PURCHASE (Cheque / DD payment favouring "Scheme Name") Refer Instruction Section B
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Scheme Name:	Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct Option:	Sweep to (applicable only for Dividend Option)
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Amount (In figures):	Amount (In Words):
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Payment Mode: <input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> NEFT <input type="checkbox"/> RTGS <input type="checkbox"/> OTM <input type="checkbox"/> Fund Transfer <input type="checkbox"/> Others
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Cheque/DD No./UTR/Reference No.:	Dated: D D M M Y Y Y Y
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Drawn on: Bank:	Branch:	City:
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Account No.:	A/c Type: <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> *NRO <input type="checkbox"/> *NRE <input type="checkbox"/> FCNR <input type="checkbox"/> Others (*NRE)
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Fund Transferred to Bank Name:	Bank A/c No.:	Bank A/c Name:
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In case you do not mention the Plan and Option, units will be allotted under default option as per respective scheme related documents.

<input type="checkbox"/> REDEMPTION
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Scheme: <b>ABSL</b>	Plan :	Option:
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Please redeem (₹):	or	units.
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If you have registered for multiple bank account facility in the above folio please specify the bank details in which you wish to receive the redemption proceeds. The bank account should be one of the registered bank account in the folio else the payout will be released to the default bank account registered in the folio.

Bank Name	Account No.
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<input type="checkbox"/> SWITCH
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I/We would like to switch ₹	or	units
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FROM SCHEME / PLAN <b>ABSL</b>	Option
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TO SCHEME / PLAN <b>ABSL</b>	Option	Sweep to (applicable only for Dividend Option)
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<input type="checkbox"/> ALLOT UNITS IN DEMAT MODE (OPTIONAL) (Please ensure that the sequence of names in the folio matches with that of the A/c. held with the depository participant)
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NSDL: Depository Participant Name:	DP ID No.: I N	Beneficiary A/c No.	Enclosed: Client Master <input type="checkbox"/>
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CDSL: Depository Participant Name:	Beneficiary A/c No.	Transaction/ Statement Copy/ DIS Copy <input type="checkbox"/>
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DECLARATION(S) & SIGNATURE(S)
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To,  
The Trustee, Aditya Birla Sun Life Mutual Fund  
Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of scheme & agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and 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 government of India from time to time. I/We have 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. 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. I/ We acknowledge that the RIA has entered into an agreement with the AMC / MF for accepting transaction feeds under the code. I/ We hereby indemnify, defend and hold harmless the AMC / MF against any regulatory action, damage or liability that they may suffer, incur or become subject to in connection therewith or arising from sharing, disclosing and transferring of the aforesaid information. I/We confirm that details provided by me/us are true and correct.

Signature	First Unitholder / Authorised Signatory	Second Unitholder	Third Unitholder
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### Acknowledgement Slip (To be filled in by the Investor)

### COMMON TRANSACTION FORM

Folio No.:	<input type="checkbox"/> Purchase <input type="checkbox"/> Switch <input type="checkbox"/> Redemption	Date:
Scheme:	Amount ( ₹ )	or Units
From Scheme (in case of switch)	To Scheme	

Collection Centre / ABSLAMC Stamp & Signature
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Aditya Birla Sun Life AMC Limited (Investment Manager to Aditya Birla Sun Life Mutual Fund)

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