TRANSACTION SLIP



DISTRIBUTOR INFORMATION																			ا	FOR OF	FICE	USE	JSE ONLY						
Name & ARN* / RIA Code / PMRN Sub Broker Nam								Name	& Code EUI				EUIN	N Register			Seri	al No.	D	ate of		Time	of F	Rece	ipt				
*Upfront commission shall be paid directly by the investor to the AMFI registered Distribut more and the investor's Distributor has opted to receive "Transaction Charges" the same a																									Rs. 10	,000 or			
_	hereby confirm the						•										. ,				Ü						erorn	ot with	
	g the advice of in-a intioning RIA code									-							cheme(s)	of LIC	Mutual Fund										
,	tioning PMRN cod	, ,			,-		,							,			` '	,			s) of LIC	Mutual F	und.						
\otimes						8)									\otimes													
SIGN HERE								SIGN H					HERE						SIGN	IGN HERE									
First/Sole Applicant/Guardian								Second A					Applicant				Third Applicant												
01.	INVESTOR	DETA	LS (M	landato	ry)																								
Folio	No.								PAN								СКҮС	No.											
First	Applicant's	Name																								K	YC		
02.	DEMAT ACC	DUNT C	ETAIL	.s																									
	se ensure tha																								Unit I	nolde	ers d	o not	
provide their DematAccount Details, an account statement shall be NATIONAL SECURITIES DEPOSITORY LTD. (N:																						•			CDI \				
									LID	J. (NSDL)					CENTRAL DEPOSITORY SERVICE (INDIA) LTD. (CSDL)														
Depository Participant Name:													'	Deposi	tory Par	rticipa	int Na	ame:											
DPID No. I N														Beneficiary A/c No.															
Beneficiary A/c No.																													
Sche	me Name:													ı	Plan/O _l	otion:													
03.	NATURE O	F TRA	NSAC	TION (Please	e √ 8	& fill u	ıp rel	evant	details)																			
	Purchase:	I/We w	ould li	ike to p	urcha	ise i	units	of the	e abo	ve men	tione	ed sc	heme	9															
Amoı	unt (in Fig.)	:											(in w	ords):														
Cheq	jue/DD No.									Dat	е 🛭	D	M	M	YY	YY		rawn	on ban	k & bra	nch:								
Acco	unt No.														Bank A	A/c type	(plea	se √) :	Savings		Curr	rent		NRO)		NRE	
Mode of payment (please ✓))			Che	que			1	DD			Fu	Fund Trnsfer				RTGS/N	IEFT				ı					
Switch: I/We would like to switch all units								or o	f Paı	rtial	units			fig):															
(amo	unt in word	s):																											
from	above men	tioned	sche	me to	scher	ne											Plan												
from above mentioned scheme to scheme Option (please ✓) Growth D							Di	ividend	Pav	out			Div	ridend R															
, , , , , , , , , , , , , , , , , , ,							Dividend Payout							fig):															
Redemption: I/We would like to redeem all units								or of Partial units or of Rs. (amount in												iig).									
	unt in word																												
	above men	tioned	sche	me/fur	id, re	den	nptio	n pro	oceed	ds to be	cre	dite	d to t	he fo				giste	red und	er this f	olio.								
Bank	/Branch														Acc	ount N	о.							\perp		\perp			
	Change of	bank r	nanda	ate (Ple	ease p	rov	ide co	ору с	of a ca	ancelled	d che	eque))																
Bank	Name:																												
Bank	Address:																												
City:										Stat	e:									Pin Code									
Account No.							Pa					yment Location:																	
Acco	unt Type:									MIC	RN	0.							IFSC	Code						T			
04.	DECLARATION	ON & SI	GNATL	JRE																									
	ave read and u																				n (KIM)	and ad	dendu	m. I/V	le agre	e to a	bide l	by the	
terms,	conditions, rule	s & regu	lations	of the Sc	heme(s	s) as	applica	able fr	om tim	e to time.	Amou	unt inv	/ested	in the S	Scheme is	derived t	hought	legitim	ate source.										
Date :								\otimes										\otimes											
Place : Sign HERE														SIGN HERE					SIGN HERE Third Applicant										
First/Sole Applicant/G									ant/G	Juardian					Second Applicant						Th	iird A	pplic	ant					
Folio No.													(TO	BE FILLED IN BY THE INVESTOR)											7.				
										,							W Elevi								L FUND				
NOWLEDGMENT	From Mr/N	Irs/M/s	s												tor)							ISC	: Sig	natu	re, St	amp	& D	ate	
EDG	Scheme L	IC MF										Plar	า		Optio				on										
Scheme LIC MF.								_																					
Transaction (Please√)				Purchase				Swi	Switch Re				demption			Change of bank manda													

Please Note: All purchases are subject to realisation of Cheque / Demand Draft / Payment Instrument.

Corporate Office: Industrial Assurance Building, 4th Floor, Opp. Churchgate Station, Mumbai - 400020. Tel.: 022-66016000 | Fax: 022-66016191 | Email ID: service@licmf.com Website: www.licmf.com | Toll Free: 1800-258-5678

Register & Transfer Agents:
Karvy Fintech Pvt. Ltd., 46, Road No 4, Street No. 1, Banjara Hills, Hyderabad - 500034.
Tel: 040-04677131-04 | Fax: 040-22388705 | Email ID: licmf.customercare@karvy.com
Website: www.karvyfintech.com