

quant mutual

Corporate Office: 6th Floor, Sea Breeze Building, Appasaheb Marathe Marg, Prabhadevi, Mumbai - 400 025. | Tel: +91 22 6295 5000 Whatsapp message: +91 9920 21 22 23 | E-mail: help.investor@quant.in | help.distributor@quant.in | www.quantmutual.com

	(Use this form i	if One Time Bank A			PLICATION FORM	ters and in blue / black ink	only. AP	P No.	
Name & Bro ARN / RI/	ker Code /	Sub Bi Agent Af	roker /	Sub Agent C		Internal Code	,		Time Stamp ence No.
 I/We hereby confirm 	that the EUIN box has	been intentionally	left blank by r	me/us as this transac	d on the investors' assess ion is executed without any the employee/relationship r	interaction or advice by the	e employee/rela	tionship manager/	
	of 1 ^ª Applicant / Guard ed Signatory /PoA/Kar				Applicant / Guardian / Signatory /PoA			^d Applicant / Guar ed Signatory /PoA	
	mpsum Investment	-			pplication ()			pplication 〇	
1. EXISTING UNIT H	OLDER INFORMA	ATION [Please	fill in your F	⁻ olio Number, Kl	N, Section 2 & procee	d to Section 7 - Inves	tment Detail	ls]	
Folio No.				Optional CKYC I	dentification No. (KIN)				
1 st SOLE APPLICAN						PAN			
LEI Code for entities	, ,								
CKYC ID No. (KIN)					F	Pls indicate if US Person			
. ,		st				⊖ Yes	-	o ^s (\$Default if no with Minor (I	,
GUARDIAN (In case	Mr. / Ms. /					⊖ Mot		•	 Legal Guard
GUARDIAN CKYC ID No. (KIN)					KYC (Please				
GUARDIAN AADHAA	AR No.]	Aadhaa	ar Copy (Pleas	se ✔) ○ Enclos	ed
POA / Custodian Na	me:						KYC	C (Please ✔)	O Proof Attach
POA / Custodian CKYC ID No. (KIN)]	POA / Custodian PAN			
Contact Person for (Corporate Investo	r: Name			-	Designat	tion:		
FIRST APPLICAN	NT AND KYC DETA	AILS							
I st SOLE APPLICAN	$\Gamma \bigcirc$ Individual or	r 🔿 Non-Indiv	idual [Non li	ndividual Investor	s should mandatorily fil	l separate FATCA, CR	S & UBO det	tails form]	
Date of Birth/Incorp Individual) (Non-in Please write the Date of b	ndividual)	MYYYY ard)	Pr	roof of Date of Bir (For minor app		Birth CertificatePassport of the Minor	0	•	tificate / Mark She ase specify)
Place of Birth / ncorporation: Please write the Date of b		Country of		India Na Others	tionality: O Indian		Gender	O Male O I	Female 🔾 Ot
Type: O Resident Ir	ndividual 🔿 Sole F	Prop O NRI -	NRE 🔘	Trust O Bank /		O O Society/AOP/BC	DI O Minor	r through Guardia	n 🔿 NRI - N
	sted Company O Pr	rivate Company (Public Ltd.	Company O Artifi	cial Juridicial Person 🔘 P	artnership Firm O FOF	- MF Schemes	Others	
a*. Occupation Detai		0 P	rivate Sector	r O Public Se		Service O Studer	nt C	Professiona	al 🔿 House
		- Ов	usiness	Retired	 Agriculture bters/Karta/Trustee/Whole 				P 🔘 Not Applic
o*. Gross Annual Inc	. ,		elow 1 Lakh		5-10 Lakh	○ 10-25		> 25 Lakh	> 1 Cro
d*. Net-worth (Manda						as on			Not older than 1 y
e*. Non-Individual In	vestors involved/) Foreign	n Exchange / Mon	ey Changer Services	Gaming/Gamb	ling/Lottery/C	Casino Service	5
any of the mentione	a services	C) Money	Lending / Pawnin	g	 None of the ab 	ove		
BANK ACCOUNT	DETAILS - Manda	atory [Refer Ins	struction No	os. 3 & 4]					
Name of the Bank:					A/~	Type $Ple(\sqrt{)}$			
Name of the Bank: Core Banking A/c No			A	ddress:	A/c.	. Type Pls. (✓) ○ N		RRENT OSA	AVINGS 🔾 NRO
				ddress:	A/c.	Type Pls. (✔) ○ N	NRE O CUI		

Mode of Holding: OAnyone	or Survivor	○ Single	С	Joint	(Please not	e that the Defa	ault option is	s Anyone o	r Survivor
2 nd APPLICANT Mr. / Ms. / M/s.	(Not Applicable in case of	Minor Applicant)				Condor			O Oth
(Please write the name as per PAN Card)							O Male	-	_
PAN Details				or a resident for tax					ult if not ¥
					oof Attached Da (A	s per PAN Card)			
Place of Birth / ncorporation: Please write the Date of birth as per Aadh	haar Card)		Nationality:	 Indian 		Gender	○ Male (Female	Other
a*. Occupation Details [Please tic	ck (✓)]			Government	◯ Stud		Professio	onal O	Housew
b*. Gross Annual Income (₹) [Plea	ase tick O Bus	siness ORef ow 1 Lakh O 1-5		5-10 Lakh	0 F10p		○ Others > >25 Lakh	. O	>1 Crore
(✓)] c*. Politically Exposed Person			EP Not A	Applicable	(Nist sides)	h = = (
Net-worth ₹ 3 rd APPLICANT Mr. / Ms. / M/s.	(Not Applicable in case of	as on Minor Applicant)				han 1 year) Gender	O Male	Female	◯ Othe
(Please write the name as per PAN Card)									
PAN Details		Pls indica		or a resident for tax	<u> </u>		Yes O	No* (*Defa	ault if not ✓
CKYC ID No. (KIN)			KY	C Pls 🗸 🔿 Pro		ate of Birth (s per PAN Card)	Mandatory)		
Place of Birth / ncorporation: Please write the Date of birth as per Aadh	Country of Bi	hirth / Olndia n: Others	Nationality:	 Indian 		Gender	◯ Male (Female	○ Other
a*. Occupation Details [Please tic	ck (√)] ○ Priv		_	Government	◯ Stud		Professio	onal O	Housew
b*. Gross Annual Income (₹) [Plea) Bus	siness ORef ow 1 Lakh O1-5		Service Agricultu 5-10 Lakh	ure O Prop		○ Others > >25 Lakh		>1 Crore
c*. Politically Exposed Person (PEP)	Status I am PEP	I am Related to PEP	Not Applicabl		<u>-</u>				. 0.016
d. Net-worth ₹					`				
6a. MAILING ADDRESS [Pleas	e provide your E-mail	ID and Mobile Numb	ber to help us	serve you better	Refer Instructio	ns 6]			
Local Address of 1 st Applicant		City		State		Pin Co	de		
Tel. Off.			Resi.		Mobile				
Mobile No specified above belongs to		vestor being(Please tick	k any one option	,	Dependent Sil				
E - Mail^^						lings			
^^Please Use Block Letters. Investors		nandatorily receive all C	communications,	Statement of Accourt	nts and Abridged A	nual Report thr	ough e-mail (only.Incase	if physical
copies are required kindly refer instruct Email address specified above belongs		to Investor being(Please	e tick any one op	tion from below.)					
□ Spouse □ Guardian(for Mine	or Investment)	ependent Children	Depende	ent Parents	Dependent Si	olings			
6b. Mandatory for NRI / FII Appl		Full Address. P. O. I	Box No. may n	ot be sufficient. I	For Overseas In	vestors, India	n Address	is preferre	ed]
Overseas Correspondence Add	ress								
7. INVESTMENT AND PAYMEN	NT DETAILS (For com	plate information or							
		-	Regular Plan	Crewith C			m capital wit	thdrawal.or	tion
Scheme :		0	Regular Plan	Growth C	er to Instruction: Payout of Incom Reinvestment of	e Distribution cu			
	Self (Non-Third P	Party Payment)	Regular Plan Direct Plan Third Party	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa	e Distribution cu Income Distribu	ution cum cap eclaration F	pital withdra=	awal optior
		Party Payment) (ue / DD / D	Regular Plan Direct Plan	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa hase	e Distribution cu Income Distribu	eclaration F	pital withdra	awal option A/c No.
Scheme : Payment Type [Please (✓)] Cheque / DD / UTR No. & Date	Self (Non-Third P Amount of Cheq	Party Payment) (ue / DD / D	Regular Plan Direct Plan Third Party D Charges,	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa hase	e Distribution of Income Distribu rty Payment D rawn on Banl	eclaration F	pital withdra Form') I y-In Bank	awal option A/c No.
Payment Type [Please (√)] Cheque / DD / UTR No. & Date	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig	Party Payment) (ue / DD / D gures (Rs.)	Regular Plan Direct Plan Third Party D Charges, if any	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa hase Int	e Distribution cu Income Distribu rty Payment D rawn on Banl Branch	eclaration F	apital withdra =orm') ay-In Bank or Cheque	awal optior A/c No. Only)
Payment Type [Please (✓)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema	Party Payment) (ue / DD / D gures (Rs.)	Regular Plan Direct Plan Third Party D Charges, if any that the sequen Ce	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa hase D int D	e Distribution cu Income Distribu rty Payment D rawn on Banl Branch	ution cum cap eclaration F c / Pa (Fc per the Depo	apital withdra =orm') ay-In Bank or Cheque	awal optior A/c No. Only)
Payment Type [Please (√)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema	Party Payment) (ue / DD / D gures (Rs.)	Regular Plan Direct Plan Third Party D Charges, if any that the sequen Ce	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa hase D int D	e Distribution cu Income Distribu rty Payment D rawn on Banl Branch	ution cum cap eclaration F c / Pa (Fc per the Depo	apital withdra =orm') ay-In Bank or Cheque	awal optior A/c No. Only)
Payment Type [Please (√)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I N	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema	Party Payment) (ue / DD / D gures (Rs.)	Regular Plan Direct Plan Third Party D Charges, if any that the sequent Ce DP	Growth (Default)	Payout of Incom Reinvestment of attach 'Third Pa hase D int D	e Distribution cu Income Distribu rty Payment D rawn on Banl Branch	ution cum cap eclaration F c / Pa (Fc per the Depo	apital withdra =orm') ay-In Bank or Cheque	awal optior A/c No. Only)
Payment Type [Please (√)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I N I I I I I I I I I I I I I I I I	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Demai ory Limited (NSDL) Benef. A/C No.	Party Payment) (jue / DD / D gures (Rs.) t Mode - Please ensure CML)	Regular Plan Direct Plan Third Party D Charges, if any • that the sequent Ce DP Image: Description of the sequent Third Party • that the sequent Image: Description of the sequent Image: Descrint Image: Description	Growth (Default) O Payment (Please Net Purc Amou Amou ce of names as ment entral Deposito Name Digit A/C No. Constant cum Holding States	Payout of Incom Reinvestment of attach 'Third Pa hase Int tioned under section ry Services (Ir Int	e Distribution cu Income Distribu rty Payment D rawn on Banl Branch	ution cum cap eclaration F c / Pa (Fc per the Depo	apital withdra Form') Iy-In Bank or Cheque	A/c No. Only)
Payment Type [Please (✓)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I N Enclosures - [Please (✓) 9. NOMINATION DETAILS* [Mit I/We hereby nominate the under me	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema Dry Limited (NSDL) Benef. A/C No. Client Masters List (inor / HUF / POA Holde entioned nominee to receive t	Party Payment)	Regular Plan Direct Plan Third Party D Charges, if any • that the sequen Ce DP 16) Transaction c cannot Nomini	Growth (Default) C Payment (Please Net Purc Amou ce of names as ment entral Deposito P Name Digit A/C No. Curr cum Holding States ate - Refer Instruct	Payout of Incom Reinvestment of attach 'Third Pa hase D int D tioned under section ry Services (Ir ment ction No. 8]	e Distribution cu Income Distribution rty Payment D rawn on Banl Branch n 3 matches as idia) Limited	ution cum car eclaration F c / Pay (Fo per the Depo d (CDSL)	pital withdra Form') ny-In Bank or Cheque	A/c No. Only)
Payment Type [Please (\checkmark)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I Enclosures - [Please (\checkmark) 9. NOMINATION DETAILS* [Mithematical mathematical mathmatical mathematical ma	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema Dry Limited (NSDL) Benef. A/C No. Client Masters List (inor / HUF / POA Holde entioned nominee to receive t ustee Company.	Party Payment) (jue / DD / D gures (Rs.) t Mode - Please ensure t Mode - Please ensure CML) 0 er / Non Individuals of the amounts to my/our creations	Regular Plan Direct Plan Third Party D Charges, if any • that the sequen Ce DP 16) Transaction c cannot Nomini	Growth (Default) C Payment (Please Net Purc Amou ce of names as ment entral Deposito P Name Digit A/C No. Curr cum Holding States ate - Refer Instruct	Payout of Incom Reinvestment of attach 'Third Pa hase D int D tioned under section ry Services (Ir ment ction No. 8]	e Distribution cu Income Distribution rty Payment D rawn on Banl Branch n 3 matches as idia) Limited Deliv yments & settlen	ution cum car eclaration F c / Pay (Fo per the Depo d (CDSL)	apital withdra Form') y-In Bank or Cheque ository Detai	A/c No. Only)
Payment Type [Please (✓)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS- Ma National Securities Deposito DP Name DP ID I N I I I I I I I I I I I I I I I I	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema Dry Limited (NSDL) Benef. A/C No. Client Masters List (inor / HUF / POA Holde entioned nominee to receive t ustee Company. R NOMINEE AS PER BE Date of Birth	Party Payment)	Regular Plan Direct Plan Third Party D Charges, if any P that the sequent C c DP DF 16 DF 16 DF 16 DF cannot Nomini edit in event of my/	Growth (Default) O Payment (Please Net Purc Amou Ce of names as ment entral Deposito P Name Digit A/C No. Cum Holding States ate - Refer Instruct /our death. I/We also u	Payout of Incom Reinvestment of attach 'Third Pa hase D int D tioned under section ry Services (Ir ment ction No. 8] understand that all pa	e Distribution cu Income Distribution rty Payment D rawn on Banl Branch n 3 matches as idia) Limited Deliv yments & settlen	ution cum caj eclaration F c / Paj (Fc (Fc per the Depo d (CDSL)	apital withdra Form') y-In Bank or Cheque ository Detai	A/c No. Only)
Payment Type [Please (√)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I N Enclosures - [Please (√) 9. NOMINATION DETAILS* [Mit NWe hereby nominate the under me valid discharge by the AMC/ MF/ Tm PLEASE REGISTER MY/OUR No. Nominee(s) Name	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema Dry Limited (NSDL) Benef. A/C No. Client Masters List (inor / HUF / POA Holde entioned nominee to receive t ustee Company. NOMINEE AS PER BE	Party Payment) (jue / DD / D gures (Rs.) t Mode - Please ensure CML) O er / Non Individuals of the amounts to my/our cree ELOW DETAILS	Regular Plan Direct Plan Third Party D Charges, if any P that the sequent C c DP DF 16 DF 16 DF 16 DF cannot Nomini edit in event of my/	Growth (Default) Control (Defa	Payout of Incom Reinvestment of attach 'Third Pa hase Int toned under section ry Services (Ir ment ction No. 8] understand that all pa	e Distribution cu Income Distribution rty Payment D rawn on Banl Branch n 3 matches as idia) Limited Deliv yments & settlen	ution cum caj eclaration F c / Paj (Fc (Fc per the Depo d (CDSL)	apital withdra Form') y-In Bank or Cheque bository Detai bository Detai con Slip (D bository Nomine tion Slip (D con Slip (A/c No. Only)
Payment Type [Please (√)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I N Enclosures - [Please (√) 9. NOMINATION DETAILS* [Mit I/We hereby nominate the under me valid discharge by the AMC/ MF/ Tri PLEASE REGISTER MY/OUR No. Nominee(s) Name 1	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema Dry Limited (NSDL) Benef. A/C No. Client Masters List (inor / HUF / POA Holde entioned nominee to receive t ustee Company. R NOMINEE AS PER BE Date of Birth	Party Payment)	Regular Plan Direct Plan Third Party D Charges, if any P that the sequent C c DP DF 16 DF 16 DF 16 DF cannot Nomini edit in event of my/	Growth (Default) Control (Defa	Payout of Incom Reinvestment of attach 'Third Pa hase D int D tioned under section ry Services (Ir ment ction No. 8] understand that all pa	e Distribution cu Income Distribution rty Payment D rawn on Banl Branch n 3 matches as idia) Limited Deliv yments & settlen	ution cum caj eclaration F c / Paj (Fc (Fc per the Depo d (CDSL)	apital withdra Form') y-In Bank or Cheque bository Detai bository Detai con Slip (D bository Nomine tion Slip (D con Slip (A/c No. Only)
Payment Type [Please (✓)] Cheque / DD / UTR No. & Date 8. DEMAT ACCOUNT DETAILS - Ma National Securities Deposito DP Name DP ID I N Enclosures - [Please (✓) 9. NOMINATION DETAILS* [Mit I/We hereby nominate the under me valid discharge by the AMC/ MF/ Tm PLEASE REGISTER MY/OUR No. Nominee(s) Name	Self (Non-Third P Amount of Cheq RTGS / NEFT in fig andatory for units in Dema Dry Limited (NSDL) Benef. A/C No. Client Masters List (inor / HUF / POA Holde entioned nominee to receive t ustee Company. R NOMINEE AS PER BE Date of Birth	Party Payment)	Regular Plan Direct Plan Third Party D Charges, if any P that the sequent C c DP DF 16 DF 16 DF 16 DF cannot Nomini edit in event of my/	Growth (Default) Control (Defa	Payout of Incom Reinvestment of attach 'Third Pa hase D int D tioned under section ry Services (Ir ment ction No. 8] understand that all pa	e Distribution cu Income Distribution rty Payment D rawn on Banl Branch n 3 matches as idia) Limited Deliv yments & settlen	ution cum caj eclaration F c / Paj (Fc (Fc per the Depo d (CDSL)	apital withdra Form') y-In Bank or Cheque bository Detai bository Detai con Slip (D such Nomino T WISH TO P	A/c No. Only)

10. FATCA and CRS DETAILS For Individuals (Mandatory) Non Individual Investors should mandatorily fill separate FATCA, CRS & UBO details form

FOR INDIVIDUALS: Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

(If Yes, please provide country/ies in which the entity is a resident for tax purpose and the associated Tax Identification No. below

1 ^{₅t} Applicant (Sole / Guardian / Non-Individual)			2 nd Applicant			3 rd Applicant			
Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency		🔿 Yes 🔿 No	Do you have any non-Inc Country(ies) of Birth / Citizenship / Nationality Tax Residency		🔿 Yes 🔿 No	Do you have any no Country(ies) of Birth Citizenship / Nation and Tax Residency	n-Indian 1/ ality O Yes O No		
Country of Birth / Incorporation			Country of Birth			Country of Birth			
Country Citizenship / Nationality			Country Citizenship / Nationality			Country Citizenship Nationality	1		
Are you a US specified person?		○ Yes ○ No Please provide Tax Payer Id.	Are you a US specified person?		○ Yes ○ No Please provide Tax Payer Id.	Are you a US specif person?	ied OYes No Please provide Tax Payer Id.		
Individual or Non-Individual investors fill this section if ticked Yes above.			Individual investor	r have to	fill in below details in case of join	t applicants			
Tax Residency Status: 1	Country:			Countr	y:	Tax Residency Status: 1	Country:		
	No.:		Tax Residency Status: 1	No.:			No.:		
Туре			Ту				Туре:		
	Country:			Countr	y:		Country:		
Tax Residency Status: 2	No.:		Tax Residency Status: 2	No.:		Tax Residency Status: 2	No.:		
	Туре:			Туре:			Туре:		
	Country:		Ca		y:		Country:		
Tax Residency Status: 3	No.:		Tax Residency Status: 3	No.:		Tax Residency Status: 3	No.:		
	Туре:			Туре:			Туре:		
Address Type			Address Type			Address Type			

(Address Type: Residential or Business (default) / Residential / Business / Registered Office) (For address mentioned in form / existing address appearing in folio)

In case of applications with POA, the POA holder should fill separate form to provide the above details mandatorily.

11. DECLARATION AND SIGNATURES / THUMB IMPRESSION OF APPLICANT(s) [Refer Instructions 2]

To The Trustees, quant Mutual Fund (The Fund) – (A) Having read and understood the contents of the SID of the Scheme applied for (Including the scheme(s) available during the New Fund Offer period); IWe hereby apply for units of the said such scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. (B) IWe 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 privations of the have the intermet of india from time to time. (C) Signature of the nominee acknowledging receipts of mylour credit will consultate full distances of quant Mutual Fund. (D) The information apprint of the scheme as and when needed. UWe will indemnify the Fund. AMC. Trustee, RTA and other intermetariance is and scheme aced. UWe will indemnify the Fund. AMC. Trustee, RTA and other intermetariance is and scheme aced. UWe will indemnify the Fund. AMC. Trustee, RTA and other intermetarian is a rany scheme regarding the eligibility, validity and authorization of mylour transactions. (E) IWe hereby confirm that I MA AMC. Trustee, RTA and other intermetariance is any other precision of mylour transactions. (E) IWe hereby confirm that IWe have not been offsered to **communicated any indicative portfolio and/ or any indicative porterm that IWe have not been offsered indicative portfolio and by the terms. Sconditions of the PIM AMC/Its distributor for this investment. I/We have not neeved the and/acce are transacting online. (H) RA: IWe hereby agree to consent the AMC beam my transaction details to the registred investment advisor (RA) through the registra or otherwise. (I) Applicable to Foreign Resident's MEASCE and the information sort on the there ace understood the FATCA ACRS Certifications: I/ We shared to the information sort on** To The Trustees, quant Mutual Fund (The Fund) - (A) Having read and understood the contents of the SID of the Scheme applied for (Including the scheme(s) available during the New Fund Offer period); I/We hereby apply for units of the said such scheme and agree to abide by the terms, conditions,

I/we have read the point number 16 and we will participant Go Green initiative

≞

For O Lumpsum 'OR' O SIP

ž	Received Application from Mr. / Ms. / M/s.		as per details below:
VEN	Scheme Name and Plan	Payment Details	Date & Stamp of Collection Centre / ISC
EDGI		Amount (Rs.)	
		Cheque / DD No.: Dated	
ACK		Bank & Branch	

Cheque / DD is subject to realisation