

APP No.:

**TRANSACTION SLIP**

Please use separate transaction slip for each scheme. This Form is for use of Existing Investors only. To be filled in CAPITAL LETTERS

DISTRIBUTOR / BROKER INFORMATION	
Name & Broker Code / ARN	Sub Broker / Sub Agent Code
<b>ARN - 30156</b>	

Folio/Account No: \_\_\_\_\_  
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

For Direct Investment Please Mention "Direct in the Column "Name & Broker Code/ARN"

**Investor Details**

Name of First / Sole applicant [Are you KYC Compliant Please (✓) Yes  or No  ] PAN No. \_\_\_\_\_

Name of Guardian (In case of Minor) [Are you KYC Compliant Please (✓) Yes  or No  ] PAN No. \_\_\_\_\_

Name of Second Applicant [Are you KYC Compliant Please (✓) Yes  or No  ] PAN No. \_\_\_\_\_

Name of Third Applicant [Are you KYC Compliant Please (✓) Yes  or No  ] PAN No. \_\_\_\_\_

**Additional Purchase**

Cheque/ DD No. \_\_\_\_\_ Cheque/ DD Date \_\_\_\_\_ DD Charge Rs. \_\_\_\_\_ Cheque/ DD Net Amount Rs. \_\_\_\_\_

Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_ City \_\_\_\_\_

Scheme \_\_\_\_\_ Plan \_\_\_\_\_ Option \_\_\_\_\_

**Redemption**

Amount: Rs \_\_\_\_\_ or Units: \_\_\_\_\_ or  All Units

Scheme \_\_\_\_\_ Plan \_\_\_\_\_ Option \_\_\_\_\_

**Switch**

Amount: Rs \_\_\_\_\_ or Units: \_\_\_\_\_ or  All Units

From Scheme \_\_\_\_\_ Plan \_\_\_\_\_ Option \_\_\_\_\_

To Scheme \_\_\_\_\_ Plan \_\_\_\_\_ Option \_\_\_\_\_

**Change of Address** (With effect from February 1, 2008, Change of address request has to be submitted at POS of CVL using "KYC Details Changes" Form, If you are KYC compliant)

Add1 \_\_\_\_\_

Add2 \_\_\_\_\_ City \_\_\_\_\_

District \_\_\_\_\_ State \_\_\_\_\_ PIN\* \_\_\_\_\_

Tel. No. STD Code \_\_\_\_\_ Office \_\_\_\_\_ Residence \_\_\_\_\_ Fax \_\_\_\_\_ Mobile \_\_\_\_\_

**Email Communication**

E-mail \_\_\_\_\_ I N B L O C K L E T T E R S

Investors providing Email Id would mandatorily receive only E - Statement of Accounts in lieu of physical Statement of Accounts.

**Change of Bank Details** (Please attach photocopy of cheque)

Bank Account No: \_\_\_\_\_ A/c Type  SB  CA  NRE  NRO  FCNR

Bank Name: \_\_\_\_\_

Branch & Address: \_\_\_\_\_

City \_\_\_\_\_ PIN\* \_\_\_\_\_ 9 Digit MICR No. \_\_\_\_\_ M a n d a t o r y

IFSC/NEFT Code \_\_\_\_\_ Payable City: \_\_\_\_\_

**PAN & KYC Updation** (Please Tick)  Photocopy(ies) of PAN Card(s) Submitted herewith  Photocopy(ies) of KYC letter(s) enclosed herewith

**Disclaimer**

I/We would like to invest in Reliance \_\_\_\_\_ subject to terms of the Statement of Additional Information (SAI) and Scheme Information Document (SID) and subsequent amendments thereto. I/We have read, understood (before filling application form) and is/are bound to the details of the SAI and SID including details relating to various services including but not limited to ATM/ Debit Card. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I accept and agree to be bound by the said Terms and Conditions including those excluding/ limiting the Reliance Capital Asset Managements Limited (RCAM) liability. 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 hereby declare that the above information is given by the undersigned and particulars given by me/us are correct and complete. Applicable for NRI Investors: I confirm that I am resident of India. I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External / Ordinary Account/FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/ our NRE/FCNR Account.

SIGNATURE/S \_\_\_\_\_

Sole / 1<sup>st</sup> applicant/Guardian/ Authorised Signatory      2<sup>nd</sup> applicant      3<sup>rd</sup> applicant

**ACKNOWLEDGEMENT SLIP (To be filled by the investor)**

Folio/Account No: \_\_\_\_\_

Received from Mr./Mrs. \_\_\_\_\_

Additional Purchase  Redemption  Switch  Change of Address  Change of Bank Account  PAN & KYC Updation  Email Communication