TRANSACTION SLIP

Investment Manager: Tata Asset Management Limited Trustee: Tata Trustee Company Limited
Toll Free: 1800 - 209 - 0101, Fax: (022) 66315194, Email: kiran@tataamc.com, Website: www.tatamutualfund.com
* To be filled in BLOCK LETTERS (Please strike off section(s) that is (are) not applicable)



Time of Receipt:

	BROKER / AGENT CODE SUB-BROKER / BANK BRANCH CODE																				EUIN CODE							
BROKEN/ AGEN	SUB-BROKER / BANK BRANCH CODE								The State of the S									LOIN CODE										
I/We hereby confirm th	pfront 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 I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales erson of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker. Lefer instruction 14 & 15)															r/sales												
1st Unitholder Signature / Thumb Impression 2nd Unitholder Sign									nature / Thumb Impression 3rd							d Un	Unitholder Signature / Thumb Impression											
Folio Number:																D	ate	:										
e-mail → (IN CAPIT																												
DEMAT ACCOUNT DETAILS: (Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with the Depository Participant). case Unit holders do not provide their Demat Account details, an account statement shall be sent to them. Such investors will not be able to trade on the stock exchange. (Refer Inst I STATE OF A S																												
Depository Participant Name:									Depository Participant Name:																			
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eneficiary A/c No.																_	_											
INVESTOR DETAILS: PAN AND KYC COMPLIANT STATUS DETAILS (MANDATORY) Name PAN Number KYC Compliant Status (please attach																												
Name										PAN Number									KYC Compliant Status (please attach proof). Refer Instruction 4.									
First Applicant/Guardian	irst Applicant/Guardian*													Т	Т	Т	Yes											
Second Applicant											+										=							
Third Applicant											$^{+}$											Yes Yes						
*If the First Applicant is a Minor, then please state the details of Guardian. Please attach PAN proof.																												
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Scheme										Pla	เท							Opti	ion									
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₹ (in Words)																												
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No. of Units		_or Amo	ount (<	<)				moun	(in vv	oras)																		
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Scheme									Plan_									Option										
No. of Units	or Amount (₹)							Amou	mount (in Words)																			
	For investors who have registered for Multiple Bank Accounts facility in the above folio (Please strike off this section if not used) Refer Inst. 10 &1																											
																		CLIOI	i ii iio	L U	seu)	Refer	IIIS	τ. ιτ	χιι			
The redemption should be processed into the following bank account as per the payout mechanism indicated by me/us: Name of the Bank: Branch:																												
account No.: Account Type:																	ank	Citv:										
Important Note: If the bank account mentioned above is different from those already registered in your folio OR If the bank account details are not fi above, the redemption will be processed into the "Default" bank account registered for the aforesaid folio.																												
The Trustee, Tata Mutual Fund																												
a) Having read & understood the governing the scheme.																								_				
If We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Direction of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt 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. I/ We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Client Process is not completed by me'us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to refund/redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b) For NRIs: I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I / we have remitted fund from abroad through approved banking channels or from funds in my / our Non-Resident Scheme; or Non-Resident Ordinary. c) The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or an 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. d) I/ We confirm that details provided by me / us in this application are true & correct. e) I/We have read & understood the AMFI Circular No. 35/MEM-COR/62/10-11 dt. 07/10/2010 regarding mandatory KYC requirement.														ections & I/ We Client" date of date of funds n or any														
Signature(s)	read & under	stood the A	uriri Cir	i cuiar INO.	35/ITIEIY	1-COK/6	02/10-11 dt. 0	//10/201	o regard	ng mar	iuato	JIY KIC	require	ınen	i.													
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FolioScheme									Option									For office use Signature of TATA MUTUAL FUND										
Received from Mr./Ms.											-												Exp	ertise tha	at's trusted			
Additional Purcha			Chea	ue/DD	No			dated			dra	wn on						autho	rity.									
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