TRANSACTION FORM For Existing Investors Only



1. DISTRIBUTOR INFORMATION (Refer Section 1 under instructions)						FOR OFFICE USE ONLY
Distributor ARN	Sub-Agent Code/	Sub Agent ARN Code	EUIN No.	CO Code	MO Code	Sales Code Date/Time
ARN-3086	Bank Branch Code					of Receipt
Upfront commission shall be paid		0		essment of various factors in	ncluding the service rendered	by the distributor.
I/We hereby confirm that the EUIN bo any interaction or advice by the emplo notwithstanding the advice of in-approp the distributor/sub broker.	yee/relationship manager/sales pe	rson of the above distributor/s	sub broker or	plicant/Guardian/ d Signatory/POA	2 ^{ªd} applicant/Authorised Signatory	3 rd applicant/Authorised Signatory
• Country of Birth / Citizenship / Nationality or Tax Residency, other than India, for any applicant? (): Yes / No (Mandatory to </). If Yes, please fill FATCA Declaration.</td						
Non Individual investors should mandatorily fill separate FATCA & UBO Declarations UNIT HOLDER DETAILS (MANDATORY) (Please fill in BLOCK Letters) (Refer Section 2 under instructions)						
Name of Sole / First Ap		Ase fill in BLOCK Letter As M/s.	's) (Refer Section 2	EXISTING FOLI		
3. ADDITIONAL PUR		or Section 2 under				
3 A. SCHEME DETAILS	CHASE REQUEST (Rei	er section s under	mstructions)			
Scheme Name						
Plan		Option				case the additional purchase is continuation of existing STP)
3 B. INVESTMENT & PA	YMENT DETAILS					continuation of existing only
Investment Amount		DD Charges			Net Amount	
Cheque/DD No	Cheq	ue/DD Date		Drawn on Bank		
Branch Name	f the scheme name · Third	Party & 0/S cheques wi			Saving Current N	RO NRE FCNR
Cheque should be in favour of the scheme name. Third Party & O/S cheques will not be accepted and transaction is liable to be rejected. Refer SID/ SAL. Investment should be through the bank account registered with us.						
	(Refer Section 4 und	ler instructions)				
From Scheme	+ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$	+ + + + + + +	To Sc Pla	neme		
Plan Option	+++++	+++++		tion	+++++	
Dividend Sub Op	tion	+++++		ridend Sub Option		
Dividend Frequer				idend Frequency		
Amount			mber of Units		OF	R ☐ All units (Please √)
5. REDEMPTION REG	QUEST (Refer Section	5 under instruction	ns)			
Scheme Plan Option						
Amount			mber of Units		OF	All units (Please $$)
6. CHANGE OF ADD	RESS (Refer Section 6	6 under instruction	s)			
Local [#] Address of 1st Applicant					+ + + + + + + + + + + + + + + + + + +	
Landmark			City			Pin
State					Please provide	ed self attested proof of adress
7. CHANGE OF CONTACT DETAILS (Refer Section 7 under instructions)						
Tel No. STD	Code	Res.	0	ff.	Fax	
1 st Applicant Mobile	No.	Email	ID			
8. DECLARATION AND SI	GNATURE(S) (Mandator	y - If left blank, appl	ication will be rejec	ted) (Refer Section	8 under instructions)	
I/We have read and understood the contents of the Scheme Information Document(s) and Statement of Additional Information of BOI AXA Mutual Fund including the section on "Who cannot invest" and "Prevention of Money Laundering". I/We hereby apply for Allotment/Purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. I/We hereby declare that I/We am /are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention of vasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We nereby authorise BOI AXA Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s) (SI 00 / Distributor / Broker, Tinvestment India. I/We nereby authorise BOI AXA Mutual Fund, shark) and (or Distributor / Broker, Tinvestment and truly steader that the information given in this application form is correct, complete and truly steader that the information given in this application form is correct, complete and furty steader of one of the local forms the purpose.						
Regulations, Notifications or Directions issued by any regulatory authority in Indiă. 1/We hereby authorise BOI AXA Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/BOI AXA Mutual Fund's bank(s) and /or Distributor / Broker / Investment Advisor. 1/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. 1/We declare that the information given in this application form is correct, complete and truly stated.						
Applicable to NRI only: 1 / we conlimit unal 1 an/ we are Non-resident Indian / person of indian Origin and unal 1 / we nave remited funds from abroad indogin approved banking channels or from funds in my/our NRE/NRD/FCNR Account, 1 / we undertake that all additional purchases made under this Follow ill also be from funds received						
from abroad through approved banking channels or from funds in my/our NRE/NRO/FCNR Account. I/ We confirm that 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.						
SIGNATURE(S)						
est en en						
1 st applicant/Guardian,	/Authorised Signatory/P0	DA 2 nd app	olicant/Authorised Si	gnatory	3 rd applicant/Aut	thorised Signatory
			- TEAR HERE -			
TRANSACTION FORM - ACKNOWLEDGEMENT						
To be filled in by the Investor						
Investment Managers						
Folio No.						
Name of Sole /First Appl	icant					Ctomp Cirroture 0. Def
ADDITIONAL PURCHASE REC	QUEST STP*	CHANGE OF ADDRESS		ANGE OF CONTACT DETAILS	3	Stamp Signature & Date
(*Incase the additional purchase		REDEMPTION REQUEST		TICH REQUEST	, 	
of existing STP) Cheque/DD No	From		··· ت الـــــــــــــــــــــــــــــــــــ	-]	-
Date	Schem	e		cheme		
Amount (Rs.)	Plan			lan		
	Option	ount		N WORDS)		
Drawn on			()	~ /		

Amount

INSTRUCTIONS FOR COMPLETING THE TRANSACTION FORM

General Instructions

- 1. This Transaction Form would help you make purchases in our various schemes, switch or redeem your existing investments.
- 2. Please read the Scheme Information Document of the respective schemes carefully before investing.
- 3. Please strike off any sections that are not relevant / applicable. Please countersign in accordance with your mode of holding against any corrections that you make in the Transaction Form.
- 4. Know Your Customer (KYC) Compliance: attested / certified copy of 'Know Your Customer' Acknowledgement ("KYC Acknowledgement") issued by CDSL Ventures Limited (CVL)/ NSDL for all fresh investment transactions, including additional purchases, switches and transactions under fresh SIP/STP / Liq-uity facilities registered from above date, irrespective of the value of such transactions.
- Non-Individual Investors: Please intimate us of any change in your list of signatories immediately after the change giving us a certified copy of the Board Resolution and List of Authorised Signatories.
- 6. Please refer the 'Guidance Notes' below. This should help you fill in the necessary details correctly and completely.
- 7. Section 9 and Section 10 of this Transaction form would help you to make changes to your existing Profile details in each Folios. New Applicants would need to fill in the Common Application Form, which is available on the AMC Website.
- 8. Duly filled in Transaction form should be submitted to your nearest Investor Service Center of BOIAXA Mutual Fund or Karvy Computershare Pvt. Ltd.
- 9. If you have more than one transaction to fulfill, please use separate form for each transaction.

10. Third party cheques shall not be accepted.

GUIDANCE NOTES TO HELP YOU FILL IN THE TRANSACTION SLIP.

Section 1 - DISTRIBUTOR INFORMATION

- In case the subscription amount is ₹ 10,000/- or more and your Distributor has
 opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or
 ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from
 your subscription amount and paid directly to the distributor. Units will be issued
 against the balance amount invested.
- Any addition or cancellation of the Distributor Information should be countersigned by the investor else the same is liable to be rejected.

Section 2 - UNIT HOLDERS DETAILS

- Please furnish the name of the sole / first Unit Holder and the existing Folio Number. Section 3 ADDITIONAL PURCHASE REQUEST
- Please specify the scheme details, your investment amount and your investment cheque details.
- Your Investment cheque should be drawn in favour of the Scheme name in which you propose to invest.
- If you are an NRI Investor please indicate source of funds for investment.
- The following mode of payments is not valid and applications accompanied by such payments is liable to be rejected:
- I. Outstation cheques
- II. Third Party Cheques.
- III. Cash/Money Order/Postal Order
- IV. Post-dated cheques
- V. Multiple cheques for investments in one scheme or single cheque for investments in multiple schemes.

Section 4 - SWITCH REQUEST

- Please specify the source and target Scheme Plan (Option) for the switch.
- Please specify the amount / number of units you wish to switch. If you wish to switch all units, please tick against the box provided for the purpose.
- If the balance in the Scheme Plan (Option) after taking into account the switch is below the minimum switch size (either in amount or in units whichever is less), the entire balance would be switched to the target scheme.
- If your switch request specifies both amount and units for switch, the latter would be processed.

Section 5 - REDEMPTION REQUEST

- Please specify the scheme/plan/option details and the amount / number of units you wish to redeem. If you wish to redeem all units, please tick against the box provided for the purpose.
- If the balance in the Scheme Plan (Option) after taking into account the redemption is below the minimum redemption size (either in amount or in units whichever is less), the entire balance would be redeemed and paid out.
- If your redemption request specifies both amount and units for redemption, the latter would be processed.
- Redemption payout would be made only to the Sole / First Unit holder favouring the bank account appearing in our records.
- Redemption payouts would be made through Demand Draft, Direct Credit with specific banks and RTGS / NEFT mode of payment.
- You are requested to furnish a copy of cheque leaf so that your bank account details can be validated at our end.
- Please note that pending verification of your bank details, your redemption
 proceeds / dividend would compulsorily be credited to old bank account / cheque
 issued in absence of relevant details.

Section 6 - CHANGE OF ADDRESS

- a) For KYC not complied folios:
 - (i) Proof of new address ('POA'); and
 - (ii) Proof of identity ('POI'): Only PAN card copy shall be considered if PAN is updated in the folio or other proof of identity if PAN is not updated in the folio
- b) For KYC complied folios:
 - Please submit KYC Change Form along with the below mentioned documents (please refer KYC Change Form for complete details).
 - (i) Proof of new address; and
 - (ii) Any other document/ form that the KYC Registration Agency (KRA) may specify from time to time.

The self attested copies of above stated documents shall be submitted along with original for verification at any of the KRAPoint of Acceptance.

In case the original of any document is not produced for verification, then the copies should be properly attested / verified by entities authorized for attesting/verification of the documents. List of admissible documents for POA & POI (for 'PAN exempted cases') mentioned in SEBI Circular MIRSD/SE/Cir-21/2011 dated October 05, 2011 shall be considered.

Section 7 - CHANGE OF CONTACT DETAILS

- Investors are requested to provide the change in Contact Details by filling up this Transaction Form.
- Investors are requested to provide one Mobile Number across all Folios.

•Section 8 - DECLARATION AND SIGNATURES

- Signature(s) should appear in the column provided after reading the declaration.
- Signature(s) should match as per the original application submitted by the applicant(s).
- Signature(s) should be as per the holding pattern.
- All signatures should be in English or any Indian language. Thumb impressions should be from the left hand for males and the right hand for females and in all cases be attested by a Magistrate, Notary Public or Special Executive Magistrate.
- Applications by minors should be signed by their guardians. In the case of a Hindu Undivided Family (HUF), the Karta should sign on behalf of the HUF.
- Authorised officials should sign the form under their official designation and company seal. A list of authorised officials, duly certified and attested, should also be attached to the application form. In the case of a trust fund, a resolution from the trustee(s) authorising such purchase or investment must be submitted.
- If you are investing through your constituted attorney, please ensure that the POA document is signed by you and your Constituted Attorney. The signature in the Application Form, then, needs to clearly indicate that the signature is by the Constituted Attorney on your behalf.

In case there is any change in KYC information please update the same by using the prescribed 'KYC Change Request form' and submit the same at the Point of Service of any KYC Registration Agency

TEAR HERE

FOR MORE INFORMATION

02.07.2019