## **Canara Robeco Mutual Fund**

**CANARA ROBECO** 

Investment Manager: Canara Robeco Asset Management Co. Ltd.
Construction House, 4th Floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001.
Tel.: 6658 5000, 6658 5086 Fax: 6658 5012 / 13 www.canararobeco.com

TRANSACTION SLIP (Please fill in BLOCK Letters)  ARN & Name of Distributor  Sub-Broker																					
		Sub-Broker																			
ARN-8	2882																				
Upfront commission shall be paid		to the AMFI r	egistered Dist	ributors b	ased or	the invest	tors' asses	sment	of variou	ıs facto	rs incluc	ling the	service r	endere	d by th	e distrib	utor				
INVESTOR DETAILS (MAN	DATORY)																				
EXISTING FOLIO NO.												ı	DATE								
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Email ID			ı																		
EMAILID																					
Telephone No.										Mobi	ile No.	L									
PAN DETAILS (Furnishing of	-	attested co	py of PAN Ca	rd is ma	ndatory							1									
First Appli	cant / Guardian					Seco	ond Applic	ant								Third	d Appli	cant			
ADDITIONAL PURCHASE	REQUEST																				
Scheme Name																					
Options	Growth Dividend Payout Dividend Reinvestment																				
	e / DD Amount (₹)						Drawn on Bank and Branch Cheque / D.D. No. & Date														
Investment	Amount (₹in Figure	25)						Investment Amount (₹ in Words)													
REDEMPTION REQUEST																					
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Scheme							<u> </u>	 I	Option (Please ✓ )  Growth Dividend												
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SWITCH REQUEST																					
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Folio No.	1 1 1	1 1	1	1 1	1	o be filled	l in by the	Invest	tor						ΑI	NA.		111		<b>)</b>	CO
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(To be filled in by the First app	licant/Authorized Sigi	natory) :					1		1		1		1		l	1			St Signatu	amp re & Da	ite
Nature of Transaction	Change of Bank	Particulars	<u> </u>			Chan	ge of Addr	ess		<u> </u>		<u> </u>			<u> </u>						
For Additional Purchase			cheme Name	e හ Plan				Amount							Ur	nits					
Redemption / Systematic			Amount (₹)							Frequency											
Withdrawal Plan																					
Systematic Transfer Plan / Switch Over	Fro		Scheme Nam	ne & Plar		То		$\dashv$	STP Commencement Date					Amount			Units				
SWITCH OVEL	FIC	<u>/111</u>				10		+													
Systematic Investment Plan		Schem	ne Name & Pl	an						Amou	ınt (₹)							Frequ	iency		

SIP / SWP / STP	FACILI	TY RE	QUEST																								
Systematic Investment Plan				Each SIP Amount (₹) Quarterly  First SIP Cheque No.: Cheque date should be either 01st, 05th, 15th, 20th, 25th of the month/quarter.																							
			Firs	t SIP C	heque I	No.:									•		ould be should l		•	,	•	•		month/	quarte	er.	
		SIP Auto Debit Dates: 01st 05th 15th 20th 25th of the month/quarter																									
		SIP Period : Start from Month Year											End On Month Year														
Systematic Withdrawal Plan (SWP)					SWP installment amount										Amount (in words)  Frequency (Please any one only)												
																Monthly Quarterly											
					SWP From D M M Y Y YY											SWP To D M M Y Y YY											
Systematic Transfe	r Plan	(STP)		From (Scheme) Scheme											To (Scheme)												
				Option Growth Dividend Reinvestmen  Dividend Payout										ment	ent Growth Dividend Reinvestment  Dividend Payout												
STP Frequency & E (Please ✓ any on			iod								mount (₹) of STP				STP From					yout				STP To			
(Please * ally one only)				Quarterly											D D M M Y					Y Y Y D D				M M Y Y Y			
CHANGE OF ADDR	ECC																										
Local Address of																											
1st Applicant																											
Landmark																											
City						<u> </u>					<u> </u>				<u> </u>						Pin						$\square$
State	Address	for Cor	respond	ence fo	r NRI Ai	oplicants	only (	Please	(3) ) In	dian by	Default			☐ Fo	reign												
Foreign Address	, , , , , , ,							rease																			
(NRI / FII Applicants)															Ĺ												
City						<u> </u>					<u> </u>				<u> </u>												Щ
Country																		Zip									Щ
DECLARATION & SIGNATURE:  To the trustees Canara Robeco Mutual Fund. I / We have read and understood the contents of the SID and Key Information Memo randum of the Scheme. I / We hereby apply to the Trustees of Canara Robeco Mutual Fund for allotment of units of the Scheme, as indicated above and ag ree to abide by the terms, conditions, rules and regulations of the Scheme. I / We hereby confirm and certify that the source of these funds is not directly / indirectly a result of "proce eds of crime" as defined in "The Prevention of Money Laundering Act, 2002" and we undertake to provide all necessary proof / documentation, if any, required to substantiate the facts of this undertaking. I have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I / We authorize the Fund to disclose details of my/our account and all my/our transactions to the intermediately whose stamp appears on the application form. I also authorize the Fund to disclose details as necessary, to the Fund's and investor's bankers for the purpose of effecting payments to me / us.  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) Applicants must sign as																											
per mode of holding	anlican	t/Cuar	dian//	Authori	ised Sig	natoru		8	⊗ 2nd Applicant/Authorised											⊗  3rd Applicant/ Authorised Signa							
Date		ISL A	эрпсап	t/Guari		Authori	isea sig	natory				ZIIU AĻ	ipiicaiii	Auti	ioriseu s	gnatoi	у				Place	Jiicanit/	Autiloi	iseu sii	Jilatory		
TEAR HERE TEAR HERE																											
M/s. Karvy Computershare Pvt. Limited "Karvy Plaza"  (For all Scheme)  H. No. 8-2-596 Avenue 4, Street No. 1, Banjara Hills, Hyderabad - 500 034.  Tel No.: (040) 23394436, 23397901, 23312454,  Fax No.: (040) 23311968, Email: crmf@karvy.com																											