

## SIP THROUGH NACH FORM

Sl No.

Advisor ARN / RIA Code/ Portfolio	'	(1 loube use separate 11al	sactions Form for each S	cheme / Flan ai	iu Transaction)
Manager's Registration No.	ub-broker/Branch Code	Sub-broker ARN	Representativ	e EUIN	For office use only
ARN-167285			E0727	28	
MY DETAILS (To be filled in Block	Letters. Please provide the fo	ollowing details in full; Please	refer instructions)		
My Name					
My Folio Number		Scheme (Account Num	per)		
SIP DETAILS (Please note that 30 B	Business days are required to se	et up the Auto debit. Default pla	n/Option will be applied incas	e of no information	, ambiguity or discrepancy)
Scheme Name/Plan/Option					
Each SIP Amount (minimum Rs. 500)	Rs.	SIP Dat	e: D D (If left blank 10 <sup>th</sup>	will be considere	d as the default date)
SIP Period Start Date M M / Y Y	Y Y Y End Date C	Continue Until Cancelled	OR M M /	YYYY	
Investment Frequency Monthly (d	default) Quarterly	First SIP Cheque Date:		Cheque	No.
Drawn on Bank/Branch					
Step-up my SIP annually by: Incre	ease in %: (in n	nultiples of 5%) (Amount in	vested will be rounded off	to the nearest Rs	. 100)
_	ease in Rupee Value:	(in multiples of Rs. 50			5 1 9 14
Tick here, if an Open Mandate - Auto  Bank Name	ט טפטוt Form (ADF) is alrea	dy registered in the Folio. P		vided below the	Bank Name and Account Number:
Tick here if attaching a New Auto De	ehit Form				
DECLARATION & SIGNATURES (		of Holding)	Date		Place
Having read and understood the contents of the State Franklin Templeton Mutual Fund for registration of ar statutory or judicial or regulatory authorities/ agencies that I/we have not received nor been induced by any recomplete to the best of my/our knowledge and belief an	ny of the aforesaid facility, and agree and the terms, conditions, rules and thate or gifts, directly or indirectly in m	to abide by any Act, Rules, Regulation regulations of the Fund and the afores naking this investment and are not in c	ns, Notifications, Directions, Guideling aid facility(ies) as on the date ofthis a	es, Orders or instruction pplication. I/We confirm	ons issued by any Indian or foreign governmental or m that the funds invested legally belong to me/us and
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