## AIG Investments COMMON TRANSACTION FORM

(Please </th <th>DIRECT</th> <th></th>	DIRECT			
	BROKER/DISTRIBUTOR	Sub Broker Name & Code		
	<b>ARN</b> - 56003			

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.

			whichever is app					
Existing Unitholde	rs Information							
						Existing Folio	No.	
Please ensure that all unitholders at PAN & KYC Detail		investment of Rs. 50,000 and	1 above.					
	plicant / Guardian		Second Appli	cant			Third Applicant	:
PAN No.*	•	PAN No.*				PAN No.*		
KYC Compliant# (Please ✓	Yes 🗌	No KYC Con	npliant# (Please √)	☐ Yes	□ No	KYC Complia	ınt# (Please √)	☐ Yes ☐ No
*Mandatory (Except for Micro	SIP) Enclose a Certified	PAN Card Copy	# KYC	Mandatory 1	or investment of	Rs. 50,000 and ab	ove	
Photo Identification								<i>'</i>
Sole / First Applicant / Guardian	oter Identity Card	Driving License	Passport	:	Photo Ration Ca	ard Photo	Debit Card Any	Other (Please specify)
Second Applicant								
Third Applicant								
* ONLY FOR MICRO SIP. Ple	ease enclose self/ARN	holder attested, copy of	the document					
Additional Purchas	se .							
Scheme Name				Plan			Option	
Investment Amount			narges (if applicable)	ı	N	let Amount (Chequ	ie / DD Amount)	
Rs.	1	Rs.	В			Rs. A	m i n u	s B
Cheque/DD No.		Prawn on (Bank / Branch	Name)					
Cheque / DD Date D	) / M M /		Type Savings	Curren	t NRE	NRO _ FCNF	C Others	Please specify
Systematic Inv	estment Plan (S	<b>IP)</b> (Through Post	Dated Cheque	es)	* Micro S	SIP		
Scheme Name				Plan			Option	
Frequency (Please ✓): □ N	Monthly Quarter	ly SIP/Micro SIP Date	:	14th	21st All fo	ur dates Installmen	t Amount Rs.	
nrolment Period From M	M / Y Y	To M M /	Y Y Cheque	No(s). From		То	No. of	Cheques
Drawn on (Bank / Branch Na	ame)							
* SIPs upto Rs. 50,000/- per year per	investor i.e. aggregate of ins	stallments in a rolling 12 month						
Switch			period or in a financial y	ear shall be refer	red to as 'Micro SIP'.			
Switch		8	i period or in a financial y	ear shall be refer	red to as 'Micro SIP'.			
			i period or in a financial y	ear shall be refer Plan	red to as 'Micro SIP'.		Option	
From Scheme (Transferor)		9	i period or in a financial y		red to as 'Micro SIP'.		Option Option	
From Scheme (Transferor)  To Scheme (Transferee)  Please transfer  Rs.		OR Units	or in a tinancial y	Plan	red to as 'Micro SIP'.			
From Scheme (Transferor)  To Scheme (Transferee)  Please transfer  Rs.				Plan Plan	red to as 'Micro SIP'.			
From Scheme (Transferor)  To Scheme (Transferee)  Please transfer Rs.  (Please ✓)  Declaration & Sign  We have read and understood the co  on "Who cannot invest" and "important the Scheme and agree to abide by the te unseted in the Scheme is through legitin Notifications or Directions issued by any coldisclose details of my investment to n received nor been induced by any rebata commission or any other mode), payable  We declare that I/We do not have any declare that the information given in this  APPLICABLE FOR NRIs: 1 / We conf	natures  Intents of the Scheme Informati Note on Anti Money Launderir rms and conditions applicable to tate sources only and does not regulatory authority in India. I ny bank(s) / AIG Global Investra to to him for the different compe passisting Micro SIPs which toget application form is correct, co irm that I am/ we are Non-Res ur NRE / FCNR Account. I/We	on Document of the above Scher g, Know-Your-Customer and Invhereto. I //We hereby declare that mivolve and is not designed for hor work of the move that on the designed for making this investment. The AF et ing Schemes of various Mutual Furd's suffig Schemes of various Mutual Furd's with the current application with the current appli	me of AIG Global Investmer estor Protection". I/We her I/We am / a uthorised to purpose of any contraventi Investment Group Mutual) and / or Distributor / Brok N holder has disclosed to m unds from amongst which till result in aggregate invests	Plan Plan All Units  at Group Mutual F eby apply for allot on make this invest ion or evasion of a Fund, its Investment Fund, its Investment he Scheme is bein ments exceeding f mitted funds from	und including the sectiment/ purchase of Unitiment and that the amony Act, Rules, Regulation that Manager and its age divisor. I / We have neitli sisions (in the form of to recommended to me/, \$5,0,000/- in a year I // abroad through approx	Sole / Firs Applicant Guardian Applicant wed W	Option	
From Scheme (Transferor)  To Scheme (Transferee)  Please transfer Rs.  (Please ✓)  Declaration & Sign  We have read and understood the cor on "Who cannot invest" and "imports" the Scheme alore to abide by the te nvested in the Scheme is through legitim votifications or Directions issued by any to disclose details of my investment to n corecived nor been induced by any rebate commission or any other mode), payable We declare that I/We do not have any videclare that the information given in this parPLICABLE FOR NRIs: 1/We conf banking channels or from funds in my I/O chrough approved banking channels or fif  If the investment is being to	natures  ntents of the Scheme Informati Note on Anti Money Launderir rms and conditions applicable to tate sources only and does not regulatory authority in India. I ny bank(s) / AIG Global Investra or or gifst, directly or indirectly, is to him for the different compe sixting Micro SiPs which toget application form is correct, co irm that I any wa ere Non-Res ur NRE/FCN Account. I/We room funds in my / ourNRE/FCN made by a Constituted	on Document of the above Scher g, Know-Your-Customer and Inw hereto. I/We hereby declare that involve and is not designed for the 'We hereby authorise AIG Globa nent Group Mutual Fund's bank(s n making this investment. The re with the current application moplete and truly stated. iddent(s) of Indian Nationality / Or undertake that all additional purcl RAccount.  Attorney please furnish	me of AIG Global Investmer estor Protection". I/We her I/We and ne authorised to purpose of any contraventi Investment Group Mutual) and / or Distributor / Brok N holder has disclosed to munds from amongst which tight result in aggregate investiging and that I/We have renases made under this folio will be a supported to the contract of the contract	Plan Plan All Units  at Group Mutual F eby apply for allot on make this invest ion or evasion of a Fund, its Investment A refus all the come is bein ments exceeding f mitted funds from will also be from fu	und including the section ment purchase of Unitiment and that the amony Act, Rules, Regulation that Manager and its age divisor. I / We have neith sisions (in the form of the recommended to mely abroad through approvinds received from abroad through approving the control of the control	Sole / Firs Applicant Guardian Second Applicant Third Applicant Spect of each applic	Option t	
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## AIG Investments **COMMON TRANSACTION FORM**

<u>ر ۲</u>	DIRECT			
se	BROKER/DISTRIBUTOR	Sub Broker Name & Code		
(Plea Mand	ARN -			

This Form is to be (	used by Existing Investors for the purpose of	on the investors' assessr	ll be paid directly by the inves ment of various factors includ of Bank Account   Chang	ding the service r	
SWP STP	☐ Change of Contact Details (Please ✓ v	vhichever is applicable)			
	nolders Information				
First Unitholder		0 11	Existing	g Folio No.	
Redemption	holders are KYC compliant in case of investment of Rs. 50,00	U and above.			
Redemption				_	
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Amount Rs.		OR Units		OR	All units (Please fill any one
Change of Ba	nk Account (New Bank Account Details)				
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Bank Name					
Branch Address				City	
MICR Code (9 digit)			IFSC Code (11 digit)		
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Systematic W	ithdrawal Plan (SWP)				
From Scheme		Pla	n	Option	
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Declaration 8					
allotment/ purchase of Unit to make this investment and of any contravention or even	stood the contents of the Scheme Information Document of the not invest" and "Important Note on Anti Money Laundering, K is in the Scheme and agree to abide by the terms and conditions dd that the amount invested in the Scheme is through legitimate vasion of any Act, Rules, Regulations, Notifications or Direction oup Mutual Fund, its Investment Manager and its agents to dis (s) and / or Distributor / Broker / Investment Advisor. I / We hav	applicable thereto. I /We hereby declare that sources only and does not involve and is not is issued by any regulatory authority in India	If I/We am / are authorised designed for the purpose L. I / We hereby authorise	olicant / ardian	
indirectly, in making this in- him for the different comp not have any existing Micro that the information given	(s) and / or Distributor / Broker / Investment Advisor. I / We have vestment. The ARN holder has disclosed to me/us all the comm veiting Schemes of various Mutual Funds from amongst which th o SIPs which together with the current application will result in in this application form is correct, complete and truly stated. : I / We confirm that I am/ we are Non-Resident(s) of Indian Nati	issions (in the form of trail commission or an e Scheme is being recommended to me/us. aggregate investments exceeding Rs. 50,000		ond blicant rd	
approved banking channels	s or from funds in my / our NRE / FCNR Account. I/We underta d through approved banking channels or from funds in my / our	ke that all additional purchases made under		olicant	
	s being made by a Constituted Attorney please fur		lolder (POA) in respect of each	applicant below:	
Name	POA Holder for Applicant 1	POA Holder for Appl	icant 2	POA Holder	for Applicant 3
Address					
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KYC Compliant #	Yes No	☐ Yes ☐ N	0		i No
(Please ✓) *Mandatory - (Except )		# KYC Mandatory for investment of Rs. 50,			