## All sections to be completed legibly in English in Black/Blue coloured ink and in BLOCK letters.

## **COMMON TRANSACTION FORM**

(FOR SUBSCRIPTION CUM SWITCH / STP TRANSACTION)



Please submit sepai	rate form	for eac	ch s	chem	e. Plo	ease	reac	d th	e instru	ctio	ns ca	arefi	ılly.										F	٩þ	piid	Ldl	.IUI	II	NO.						
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4. BANK DETAILS (I	_																																		10.4)
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Pramerica
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BALLETT ALL ELLARD

**ACKNOWLEDGEMENT SLIP** (To be filled in by the investor) **Application No.** 

Received from Mr. / Ms. / M/s.	an application for investment in Pramerica Mutual Fund -	
Scheme Name	Option 🗌 Growth 🗎 Dividend	
for ₹ (in figures)	vide Instrument no	
Bank	Branch City	

All purchases are subject to realisation of cheque/demand draft and furnishing of mandatory information/documents. Please retain this slip till you receive your Account Statement.

I would like to apply for E-PIN. An E-PIN will allow you to acce	ss your account/tran	sact through electronic cl	hannels, subject to the Terms & Co	Conditions for the facility as made available t	_							
6. INVESTMENT/ PAYMENT DETAILS	Option	Dividend Facility		hidand Francisco III (D)	(Refer Instruction No. 6)							
Scheme Name	Option  Growth*	Dividend Facility  ☐ Payout		<b>Dividend Frequency #</b> (Please ✓ any o  Weekly	Monthly							
☐ Pramerica Liquid Fund☐ Pramerica Ultra Short Term Bond Fund	☐ Dividend  * Default Option	Re-investment*		facility is available on a Daily/ Weekly/ Fortni out facility is available at Fortnightly & Mont								
☐ Lumpsum Investment:		☐ SIP Investment:	: (Monthly)									
I. Cheque / DD Amount _ ₹				<b>bit)</b> Please also fill and attach the SIP Auto I d and subsequent Instalment cheque Details								
II. DD Charges _₹		1 1 -		T0 T0 D D M M Y	YYY							
III. Investment Amount ₹   (I + II)		Instalment Amt. (A	A) Till I instruct to	SIP Period — No. of Instalments (B)	Total Amount (c) = (AxB)							
Mode of Payment (✓) ☐ Cheque ☐ Demand Draft	☐ Fund Transfer	₹ Min ₹ 500 I. First SIP Instalr		SIP OR Min 10	₹   (Min ₹ 5000)     Demand Draft							
Instrument No Dated D D M /	1 Y Y Y Y	Instrument No Dated D D M M Y Y Y Y  Name of the Bank A/c holder										
Name of the Bank A/c holder		Drawn on										
Drawn on Name of the Bank			ıbsequent Instalment Deta	ailc·								
Branch & City		SIP Period From	D D M M Y Y	Y Y TO D D M M Y	YYY							
NRI/FII Investors, Please indicate source of funds for yo		SIP Date (Please √ ase √ ) □NRE										
Th	ird party cheq	ue / transfer will r	not be accepted for inve		(Refer Instruction No. 6)							
EXCEPTION TO THIRD PARTY PAYMENT (ie. payment by The details of the cheque provided above pertain to my/			☐ Yes	□ No	(Mandatory to √)							
If No, my relationship with the bank account holder is				(Application Form without this info								
7. SWITCH (Please ( ) if you want to avail this fa  I/ We would like to switch all units purchased hereby, to the scho					(Refer Instruction No. 7)							
	ion (Please ✓)	Dividend Facility	J (Please ✓)	<b>Switch Frequency</b> (Please ✓	$\overline{}$							
□ PRAMERICA EQUITY FUND □ Grov		☐ Dividend Pay		ts, in one lumpsum on the NFO closing d	ate of switch in scheme							
□ PRAMERICA DYNAMIC FUND □ Divid  "STP (Systematic Transfer Plan)	lend	☐ Dividend Re-	investment*   $\square$ In Insta	alments, via STP (please fill the STP section	ate of switch in scheme (* pefault Option)							
STP Amount: ₹	STP Period: From	m _ DD MM YYY	YY_ TO DD MM YYY	Y No. Of Instalments:	Option							
STP Frequency: ☐ Daily ☐ Monthly	STP Dates:			 25th								
8. NOMINATION DETAILS					(Refer Instruction No. 8)							
8. NOMINATION DETAILS  I/We do hereby nominate the undermentioned Nominee( settlements made to such Nominee(s) and Signature of the	s) to receive the UI Nominee(s) ackno	nits allotted to my/our owledging receipt there	r credit in my/our folio in the e eof, shall be a valid discharge b	event of my/our death. I/We also under								
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I/We do hereby nominate the undermentioned Nominee(settlements made to such Nominee(s) and Signature of the Name & Address of Nominee(s)  1.  2.  3.  9. DECLARATION AND SIGNATURES (MANDATORY - A I/I have read and understood the contents of the Stateme respective Scheme(s) and Addenda thereo, issued from time Scheme(s) of Pramerica Mutual Fund, as indicated above are any rebate or gifts, directly or indirectly in making this invest investments exceeding ₹ 50,000 in a year. I / We declare the designed for the purpose of contravention or evasion of any ARN holder has disclosed to me/us all the commissions (in the Which the Scheme(s) is/are being recommended to me/us. I/ process to the satisfaction of the AMC/Pramerica Mutual Funthe date of such redemption. Applicable to NRIs: I/We confirm that I am/We are Non-Resbanking channels or from funds in my/our Non-Resident Ext SIGNATURE(S) (ALL APPLICANTS must sign here)  If the investment is being made by a Constituted Attorn Name POA Holder for 1 Applicant PAN Yes No * (if Yes, attach proof) * (if Yes, attach pro	PPLICATION WITH  The of Birt  PPLICATION WITH  The of Additional In  The to time and the I  Id agree to abide be the order of the I  Id agree to abide be the order of the I  Id agree to abide be the order of the I  If of Additional In  The order of the I  If of I  If of I  If of I  Ind I  If of I	Woledging receipt there Name (To be furnished)  OUT SIGNATURE(S) We formation of Prameric instructions overleaf. I/y the terms, conditions by declare that I/We do not another the information given in the information given gi	will be a valid discharge to a Address of the Guardian ed in case the Nominee is a a Mutual Fund and the Schen (We, hereby apply to the Trust, rules and regulations of the rust, rules and regulations of the rust is investment and the amount ons or any other applicable law node), payable to him for the chis application form is correct, ca Mutual Fund to redeem the when the function of the correct of the rust is application form is correct, ca Mutual Fund to redeem the whom the function of the correct of the rust is application form is correct or a Mutual Fund to redeem the whom the function of the rust is application form is correct or an additional form that the function of the rust is a point of the rust is a function of the rust is a	event of my/our death. I/We also under by the AMC/Mutual Fund/Trustees.  Signature of Guardian a Minor)  (me Information Document(s)/Key Information and the competition of allotmarelevant Scheme(s). I/ We have neither most which together with the current application and inferent competing Schemes of various, complete and truly stated. In the event of units against the funds invested by me/ounds for subscription have been remitted  Date DD  3 <sup>rd</sup> Applicant/Guardian/Author DA) in respect of each applicant below POA Holderf	Proportion(%) (should aggregate to 100%) Default : Equal proportion  Refer Instruction No. 9) mation Memorandum of the tent of units of the respective eceived nor been induced by action will result in aggregate imate sources only and is not rany statutory Authority. The Mutual Funds from amongst of my/our not fulfilling the KYC us at the applicable NAV as on from abroad through normal  M M Y Y Y Y  Portised Signatory/POA  W: for 3 d Applicant  No  No  Ition visit us at icamf.com  us at							

Bye-laws
Partnership Deed
Notorised POA (signed by investor and POA Holder)

Call us (Toll free) at 1800 266 2667