

TAURUS MUTUAL FUND

SWP or STP / OptiSTP or DSO Form (Please read instructions carefully before filling up the form)

ARN/RIA Code and Nam	е	Sub-Bi	roker's AR	N Coc	le I	Employee	e Uniqu	e Identity	/ Numb	er*	Intern	al Cod	e for S	ub-br	oker	/Emplo	oyee	Tir	ne Sto	mp (for	office (use only)
ARN-181211	RN-181211						E															
Upfront commission shall be paid directly by the Investors subscribing under the "DIRECT" plan of the s						ed on the in	ivestors' d	ssessment	of variou	s factor	rs includ	ing the s	ervice I	rendere	d by t	he distri	butor.					
1. EXECUTION ONLY (To be signed wher																						
*I/We hereby confirm that the EUIN box has	been intenti	onally lef	t blank by m	e/us as tl	nis is an	"execution-	only" tran	action with	out any in	iteractio	n or adv	vice by th	e emplo	yee/re	ations	hip man	ager/s	sales p	erson of	the abov	e distril	outor or
notwithstanding the advice of in-appropriater	ess, if any, p	provided	by the employ	/ee/relat	ionship I	manager/so	ıles person	of the dist	ributor an	d the dis	stributor	has not	charged	any ad	visory	fees on	this tro	ansacti	on.			
	se sign he			A .I	<u></u>	_			ise sign		<u> </u>		-						here			_
First / Sole Applicant/ Guc	rdian /				•			d Acco			•				Thir	d Acc	1			bignatu		
Registration			System	atic	With	drawa	I Plar		Syste								D	0CW	/ Sw	еер (Opti	on
Cancellation									Opti	Syste	ema	tic Tr	anst	er P	an							
2. INVESTOR DETAILS	L ///	Ms. M	/0																			
Name of Sole/First Applican			/5																			
Name of Second Applicant	Mr.												_									
Name of Third Applicant	Mr.																					
Name of Guardian (for Mind	or applie	cant) /	/ POA H	older	/ Co	ntact p	erson (for No	n-indl.	Арр	lican	;)										
Mr. Ms.																						
3. SYSTEMATIC WITHDRAW			•	wal Pl	an as	per the	details	below	-													
From→ Folio No.						eme Na		501011								l	Plan	/Or	otion			
Fixed SWP Amount / No.of	Jnits	<u> </u>							Г	Frea	uenc	/		Mo	nthl				uarte	rlv		
Fixed SWP Amount / No.of Units Frequency SWP date (Please 3) 1 st														/				.,				
Enrolment Period	 Start F							nd on			V	VV		1		No	of I	ncto	llmer	+c		
			<u>vi</u> /vi /				L		1 1 1 1 1	/		1		J		INO.	011	nsia	Imen			
4. SYSTEMATIC TRANSFER F I/We wish to switch units through			P as per	the de	tails k	below -																
Systematic T	ransfer	Plan	(STP) DE	TAILS	;					Ор	ti Sys	tema	tic Tr	ansf	er P	lan ((Opti S	STP)	DETA	ILS		
							Mir	n. Instal	lment .	Amt.												
STP Installment Amount (₹)							Ma	x. Insta	llment	Amt.										[:] ixed Min. of ₹1/-th		ent amount
From→ Folio No.		\top			Sche	eme Na	me						Plo	In				(Optic	n		
To → Folio No.				1	Sche	eme Na	me						Plo	ın				(Optic	n		
Transfer Frequency		uily .			Week	lv.	•	Пм	onthly		[Quart	erly								
Transfer date (Please 3)		, 	_]1st □]_5⊧ł	_			15th			 (annlise	ble ONLY		'	artarl	, transfor	1					
, ,														nniy/ Qu 1	unen							
Enrolment Period	Start F	rom	VI /VI	Υ T	T	TT	E	nd on		/	T	ΙI	T			INO.	of I	nsfa	llmer	fs		
5. IDCW SWEEP OPTION (E	SO) DI	ETAILS	i (Refer	instru	ction	s overl	eaf)															
I/We wish to transfer the IDCW	declare	ed thro	ough IDC	W Swe	<u> </u>	·	·	e detail	s belov	v -			-1					_				
From→ Folio No.		\perp		_		eme Na	_						Plo	_				(Optic	n		
To → Folio No.						eme Na							Plo						Optic			
Dedaration & Signature (s): Having read and understood regulations governing the scheme. I/We hereby declare thu Prevention of Money Laundeing Act, Prevention of Corruptio this investment. Applicable for NRI's only - I/We confirm holder has disclosed to me/us all the commissions (in the I/We confirm that details provided by me/us are true and	t the amount in n Act and / or c that I am/we c	nvested in th any other ap are Non Res	he scheme is thro oplicable laws en sidents of Indian I	ough legitin acted by th Vationality, 1 0de), pay	nate source e governm /Origin an able to hir	es only and do ent of India fro d that I/we ho n for th<u>e diff</u>e	es not involve om time to tin ove remitted i e rent compe	e and is not de ne. I/We have funds from ab	signed for th e understood road through of various I	e purpose the detail approved Nutual Fu	e of the co ils of the so d banking unds from	ntravention heme & I/ channels o amongst	of any Ad we have from fun w hich the	t, Rules, not receiv ds in my/ Scheme	Regulat ed nor l 'our No	ions, Notif 1ave been 1-Resident	ications induced Externc	or Ďirec I by any al /Non-	tions of th ebate or g Resident (, e provisions ifts, directly	of the In or indire	come Tax Act, ctly in making
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	correct. se sign he urdian /	Ple ere POA F	Holder /	Auth.	Sign							~~~~	-		Thir	P d Acco	ount	e sigr Hold	here der's S	ignatu	re	
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×	correct. se sign he urdian /	Ple ere POA F	Holder /	Auth.	Sign	EDGEME	INT - SV		or Opti	STP / I		~~~~	-		Thir	P d Acco	ount	e sigr Hold	here der's S	ignatu	re	
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