

# Systematic Withdrawal Plan (SWP)

Please refer instructions before filling the form

I/We hereby apply to the Trustees of Invesco Mutual Fund for Systematic Withdrawal Plan (SWP) enrollment under the following scheme and I / We agree to abide by the terms and conditions of the Plan

## Key Partner/Agent Information

Mutual Fund Distributor ARN ARN - <b>ARN-181211</b>	Sub-Broker ARN Code ARN -	Internal Sub-Broker/Employee Code
Employee Unique Identification No. (EUIIN) <b>E</b>	Registered Investment Advisor (RIA) Code / Portfolio Manager's Registration Number (PMRN)	

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.

Folio Number	
Application Number	

## 1. Applicant's Personal Details

First/Sole Applicant Name	Mr. / Ms. / M/s.
PAN/PEKRN	
KIN	

## 2. Systematic Withdrawal Plan (SWP) Mandate

(Investors applying under the direct plan must mention "Direct" in the Plan box provided below)

Scheme	Invesco India	
Plan:	<input type="checkbox"/> Regular <input type="checkbox"/> Direct	Option
	<input type="checkbox"/> Fixed Amount <input type="checkbox"/> Capital Appreciation Amount	
Frequency	<input type="checkbox"/> Weekly (1 <sup>st</sup> business day of each week) <input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Quarterly	
SWP Date (✓ Any One)	<input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 15 <sup>th</sup> (Default) <input type="checkbox"/> 20 <sup>th</sup> <input type="checkbox"/> 25 <sup>th</sup>	
Period of Enrollment from (1st Installment)	M M Y Y Y Y	To (Last Installment) M M Y Y Y Y
Withdrawal Amount (Per Installment)	Rs. in Words	
	(Not applicable for Appreciation Option)	
	Rs. in Figures	
No. of Installments		Total Withdrawal Rs. in Figures

## 3. Applicant's Signature

Please note: Signature(s) should be as it appears on the Application Form and in the same order. In case the mode of holding is joint, all Unitholders are required to sign

Sole/First Applicant/Guardian	Second Applicant	Third Applicant
Date	Place	